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Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 715923 (9)

1. Corporation Name

GREEN HILLS PARK WEST NO. 3, INC.

Principal Place of Business

Mailing Address

17070 SW 112 CT.
MIAMI FL 33157

17070 SW 112 CT.
MIAMI FL 33157-3905

3. Date Incorporated or Qualified
01/22/1969

3a. Date of Last Report
03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number
59-1231690

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FITGERALD, RUTH
11305 SW 171ST ST
MIAMI FL 33157

81 Name

STEVE MORRIS

82 Street Address (P.O. Box Number is Not Acceptable)

17150 SW 113 CT, VILLA 24

83

84 City

MIAMI

FL

85 Zip Code

33157-3901

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

3-29-97

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME BESSIN, ROGOW
STREET ADDRESS 17234 SW 113TH CT
CITY-ST-ZIP MIAMI, FL 00000

TITLE T
NAME SKLENAR, FRED
STREET ADDRESS 17211 SW 113 COURT
CITY-ST-ZIP MIAMI, FL 00000

TITLE D
NAME BRAUNSTEIN, MAE
STREET ADDRESS 11304 SW 171ST ST
CITY-ST-ZIP MIAMI, FL 00000

TITLE P
NAME FITZGERALD, RUTH
STREET ADDRESS 11305 SW 172ND ST
CITY-ST-ZIP MIAMI, FL 00000

TITLE S
NAME ELLEN QUACKEN BOSS
STREET ADDRESS 17109 S.W. 113CT.
CITY-ST-ZIP MIAMI FL

TITLE D
NAME CORRINE CARPENTER
STREET ADDRESS 17125 S.W. 113 CT.
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE STEVE MORRIS ☒ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS 17150 SW 113 CT, VILLA 24
4.4 CITY-ST-ZIP MIAMI FL 33157-3901

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE VP ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/2/97 (305) 398-3134

Daytime Phone # 0031356

CR2E037 (9/96)