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Feb 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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

3. Date Incorporated or Qualified: 01/22/1969

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

7. Is this nonprofit corporation a homeowners association? ☑ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26 C/O MIAMI MANAGEMENT
22 Suite, Apt. #, etc.	27 14275 SW 142 AVE
23 City & State	28 MIAMI, FL.
24 Zip / 25 Country	29 33186 / 30 USA

9. Name and Address of Current Registered Agent

MORRIS, STEVE
17150 SW 113 CT VILLA 21
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name: KALLICHE, ANTHONY A.
82 Street Address (P.O. Box Number is Not Acceptable): BECKER & POLIAKOFF, P.A.
83: 5201 BLUE LAGOON DR. #100
84 City: MIAMI FL 85 Zip Code: 33126

11. Pursuant to the provisions of Sections 617.0502 and 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: Kalliche Becker & Poliakoff PA — DATE: 1/21/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BESSIN, ROGOW		1.2 NAME		
STREET ADDRESS	17234 SW 113TH CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SKLENAR, FRED		2.2 NAME		
STREET ADDRESS	17211 SW 113 COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BRAUNSTEIN, MAE		3.2 NAME		
STREET ADDRESS	11304 SW 171ST ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		3.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MORRIS, STEVE		4.2 NAME		
STREET ADDRESS	17150 SW 113 CT VILLA 21		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ELLEN QUACKEN BOSS		5.2 NAME		
STREET ADDRESS	17109 S.W. 113CT.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CORRINE CARPENTER		6.2 NAME		
STREET ADDRESS	17125 S.W. 113 CT.		6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		6.4 CITY-ST-ZIP		

14. I 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: Steven R. Morris — 1/29/98 — (305) 348-3134

CR2E037 (10/97)