## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 72324

(9)

1. Corporation Name											
EMERALD GREEN SECTION FOUR, INC.											
Division (Division )											
Principal Place of Business Mailing Address											
3501 KEYSER AVE. 3501 KEYSER AVE.											3. Date Incorporated or Qualified
VILLA 61 VILLA 61 HOLLYWOOD FL 33021 HOLLYWOOD FL ;							21				04/24/1972
us us											4. FEI Number Applied For
Principal Place of Business     2a. Mailing Address											59-1514402   Not Applicable
21					26						5. Certificate of Status Desired Securificate Securificat
Suite, Apt. #, etc.					Suite, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be
22					27				,		Trust Fund Contribution
City & State					City & State						7. Is this nonprofit corporation a homeowners association?
Zip						28					Yes No
24	25			29	¬ ·			Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No
9. Name and Address of Current Registered Agent											10. Name and Address of New Registered Agent
								81	Name		
PARIS, MILTON								82	Street	Addres	ess (P.O. Box Number is Not Acceptable)
3501 N. KEYSER AVENUE								83			
VILLA #61								63			
HOLLYWOOD FL 33021								84	City	-	85 Zip Code
11. Pursuant	to the provisi	ons o	f Sections 617,0502	and 6	317.1508, Florida	Statutes	s, the a	bove	-named	corpor	oration submits this statement for the purpose of changing its registered
agent. I a	m familiar wi	th, an	d accept the obligati	ons c	of, Section 617.05	03, Flor	ida Sta	tutes		JOI BLIO	ion's board of directors. I hereby accept the appointment as registered
SIGNATURE _						(1) (Ome					ed when reinstating) DATE
12.	Signature, typed	or pari	OFFICERS AND					ea Age	it signature	requirea	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P			☐ DELETE			1.1 T	1.1 TITLE		D	Change M Addition
NAME	PARIS, MILTON				1,2						RON ADRIENNE Change MAddition
STREET ADDRESS					1			1 1 7		3	
CITY-ST-ZIP	HOLLYWOOD, FL				T 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					140	torywood, Fr 33001
TITLE NAME	VD BLANKE	ר סו	REOT		_			2.1 TITLE 2.2 NAME			, Change Addition
STREET ADDRESS	BLANKET, ROBERT  3501 KEYSER AVENUE, #55								2.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL								T-ZiP		
TITLE	D			DELETE				3.1 TITLE			Change Addition
NAME	MILLER, BERNICE								3.2 NAME		
STREET ADDRESS	3501 KEYSER AVENUE, #54								3.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD, FL				DELETE			3.4. CITY-ST-ZIP			Change Addition
TITLE NAME	KRUPNICK, ELLEN							4.1 IIILE 4.2 NAME			TEIN, BABARA DEChange LADGEON 501 N. KEYSER AND # 38 0LLYWOOD FL 33021
STREET ADDRESS	d							4.3 STREET ADDRESS		25	SOI N. KEYSER AND # 38
CITY-ST-ZIP	HOLL WOOD FL								- ZIP	110	OLLYWOOD FL 33021
TITLE	STD	-			DELE	TE	5.1 T			11.0	☐ Change ☐ Addition
NAME	KAPLAN,	BUF	RLEIGH				5.2 N	IAME			
STREET ADDRESS			AVE. VILLA #37			5.3 STREET ADDRESS					
CITY - ST - ZIP	HOLLYW				5.4 CITY-ST-ZIP						
TITLE	D				☐ DELE	TE	6,1 T				Change Addition
NAME	BENDEL,						6.2 N	IAME			
STREET ADDRESS	3501 N F	EYS	er avenue, vill	4 61		6.3			ADDRESS		

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 or changed, or on an attachment with an address.

SIGNATURE:

1. 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 or changed, or on an attachment with an address.

SIGNATURE:

1. For the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 carrier of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as if made under oath, that I am an officer or director of the same legal effect as