

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # 724557

(4)

1. Corporation Name  
GARDENS 101, INC. THE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB -6 PM 12:02

Principal Place of Business  
100 ASPEN CRCL.  
SEMINOLE FL 34647-0946

Mailing Address  
100 ASPEN CRCL.  
SEMINOLE FL 34647-0946

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/17/1972  
3a. Date of Last Report 02/23/1994

4. FEI Number 59-1426381  
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes  Yes  No

2. Principal Place of Business

21 Suite, Apt. #, etc. 26 Mailing Address

22 City & State 27 Suite, Apt. #, etc.

23 Zip 28 City & State

24 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
SMITH, ORVILLE  
117 ASPEN CIR  
SEMINOLE FL 34647

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS	
TITLE	NAME
D	JOY, ROBERT 202 ASPEN CIR SEMINOLE, FL 00000
S	SIMPSON, RAY 104 ASPEN CIRCLE SEMINOLE, FL 00000
D	MADENBERG, LENA 212 ASPEN SEMINOLE, FL 00000
D	SANTORO, VINCENT 108 ASPEN CIR SEMINOLE, FL 00000
V	BELLMER, R. 105 ASPEN CIRCLE SEMINOLE, FL 00000
P	SMITH, O. 117 ASPEN CIRCLE SEMINOLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
DATE	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *Ray Simpson*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

1/25/95  
813-397-6570  
Division Three 4