

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 17 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 # 752663 (5)
1. Corporation Name
GREENBRIAR VILLAS CONDOMINIUM OWNERS' ASSOCIATION, INC.



Principal Place of Business P.O. BOX 3830 SEBRING FL 33871	Mailing Address P.O. BOX 3830 SEBRING FL 33871-3830
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3. Date Incorporated or Qualified 05/28/1980	3a. Date of Last Report 04/22/1996
4. FEI Number 59-2212874	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent BOND, ANNE 2206 SUNRISE DRIVE P.O. BOX 3830 SEBRING FL 33870	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
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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]* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, EVA	1.2 NAME	
STREET ADDRESS	38 LINSTEDT STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAULT STE.MARIE,ONTARI	1.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	2.1 TITLE	DIRECTOR ONLY <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OCHMAN, STAFIE	2.2 NAME	
STREET ADDRESS	52 KENT AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAULT STE.MARIE,ONTARI	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, HARRY	3.2 NAME	
STREET ADDRESS	39 VALHALLA PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SAULT STE. MARIE, ONT., CAN.	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, CAREY	4.2 NAME	
STREET ADDRESS	3651 EDGEWATER DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	RAY SMITH
STREET ADDRESS		5.3 STREET ADDRESS	3651 EDGEWATER DR.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	SEBRING, FL. 33872
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]* **RAY SMITH** Date: **4/11/97** Daytime Phone #: **941/385-2561**

CR2E037 (9/96)