

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

**NONPROFIT CORPORATION ANNUAL REPORT 1996**



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

**FILED**  
**Feb 16, 1996 08:00 AM**  
**Secretary of State**

**DOCUMENT # 757213 (4)**  
1. Corporation Name  
**GREENWICH ASSOCIATION, INC.**



Principal Place of Business Mailing Address  
**1470 NE 123RD ST. MANAGERS OFFICE NORTH MIAMI FL 33161**

3. Date Incorporated or Qualified **05/21/1981** 3a. Date of Last Report **02/14/1995**  
4. FEI Number **59-2094391** 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country  
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**KALLICHE, ANTHONY A. ESQ.**  
**9900 S. DADELAND BLVD SUITE 408**  
**MIAMI FL 33156**

10. Name and Address of New Registered Agent  
81 Name **DCI-Development Consultants, Inc.**  
82 Street Address (P.O. Box Number is Not Acceptable) **2901 Simms Street**  
83  
84 City **Hollywood,** FL 85 Zip Code **33020-1510**

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 617.0508, Florida Statutes.

SIGNATURE *[Signature]* DATE **2/12/96**  
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	DP	<input type="checkbox"/> DELETE
NAME	HANSKAT, JAMES	
STREET ADDRESS	1470 NE 123ST #312	
CITY-ST-ZIP	N MIAMI FL	
TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	SICIUS, LAUREEN	
STREET ADDRESS	1470 NE 123ST #PH-15	
CITY-ST-ZIP	NORTH MIAMI FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	FLECHER, MARIAN	
STREET ADDRESS	1470 NE 123ST #1211	
CITY-ST-ZIP	N MIAMI FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	BAGLES, ROSEMARIE	
STREET ADDRESS	1470 N E 123ST PH-11	
CITY-ST-ZIP	N MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	STEWART, J PAUL	
STREET ADDRESS	1470 NE 123ST #704	
CITY-ST-ZIP	N MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GLASSMAN, NEAL	
STREET ADDRESS	18051 BISCAYNE BLVD #702	
CITY-ST-ZIP	N MIAMI BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Harvey, Holly	
1.3 STREET ADDRESS	1470 NE 123 Street #PH9	
1.4 CITY-ST-ZIP	N Miami FL	
2.1 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Dianna Raymond	
2.3 STREET ADDRESS	1470 NE 123 Street #401	
2.4 CITY-ST-ZIP	N. Miami, FL	
3.1 TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Charles Solomon	
3.3 STREET ADDRESS	1470 NE 123 Street #1201	
3.4 CITY-ST-ZIP	N Miami, FL	
4.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Gary McVay	
4.3 STREET ADDRESS	1470 NE 123 Street #PH-7	
4.4 CITY-ST-ZIP	N Miami, FL	
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Rebie Bair	
5.3 STREET ADDRESS	1470 NE 123 Street #316	
5.4 CITY-ST-ZIP	N Miami FL	
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Bruce Levy	
6.3 STREET ADDRESS	1470 NE 123 Street #916, N Miami, FL	
6.4 CITY-ST-ZIP	N Miami, FL	

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 119.07(3)(k), 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 unchanged, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE **2/5/96** DAYTIME PHONE # **305/446-2646**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)

# Greenwich I

---

Attachment to 1996 Annual Report

7th Board Member is a Director

Jeff Gonzalez  
1470 NE 123 Street #114  
N Miami, FL 33161