

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

DOCUMENT # 766480 (8)
1. Corporation Name
GRIFFIN GARDENS TENANT LEAGUE, INCORPORATED



900001717789
03/26/96 01077 018
***70.00

Principal Place of Business: KRUGER, JANE. A, 4881 GRIFFIN ROAD, 204, DAVIE FL 33314, US
Mailing Address: KRUGER, JANE. A, 4881 GRIFFIN ROAD, 204, DAVIE FL 33314, US

3. Date Incorporated or Qualified: 01/11/1983
3a. Date of Last Report: 02/13/1995

21	2. Principal Place of Business	2a	Mailing Address	4	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		NOT APPLICABLE	Not Applicable
22	City & State	27	City & State	5	Certificate of Status Desired	\$8.75 Additional Fee Required
					<input checked="" type="checkbox"/>	
23	Zip	28	Zip	6	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
					<input type="checkbox"/>	
24	Country	29	Country	8	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRUGER, JANE A
4881 GRIFFIN ROAD, 204
DAVIE FL 33314

81	Name	MAYES, MARGARET
82	Street Address (P.O. Box Number is Not Acceptable)	4881 GRIFFIN ROAD #107
83	City	DAVIE, FLA. 33314
84	City	FL
85	Zip Code	

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: *Margaret Mayes* DATE: *Jan. 19, 1996*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRUGER, JANE A	1.2 NAME	MAYES, MARGARET
STREET ADDRESS	4881 GRIFFIN ROAD, 204	1.3 STREET ADDRESS	4881 GRIFFIN ROAD #107
CITY-ST-ZIP	DAVIE FL	1.4 CITY-ST-ZIP	DAVIE, FLA. 33314
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAYES, MARGARET	2.2 NAME	JUANITA RIVERA
STREET ADDRESS	4881 GRIFFIN ROAD #107	2.3 STREET ADDRESS	4881 GRIFFIN ROAD #216
CITY-ST-ZIP	DAVIE FL	2.4 CITY-ST-ZIP	DAVIE, FLA. 33314
TITLE	SD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMMONS, EVANGELINE	3.2 NAME	MILDRED BAUMGARTH
STREET ADDRESS	4881 GRIFFIN ROAD #414	3.3 STREET ADDRESS	4881 GRIFFIN ROAD #102
CITY-ST-ZIP	DAVIE FL	3.4 CITY-ST-ZIP	DAVIE, FLA. 33314
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POLLITT, MAE	4.2 NAME	<i>Jane Voigt</i>
STREET ADDRESS	4881 GRIFFIN ROAD #116	4.3 STREET ADDRESS	4881 GRIFFIN ROAD APT 411
CITY-ST-ZIP	DAVIE FL	4.4 CITY-ST-ZIP	DAVIE FLA 33314
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	JANE A KRUGER 204
STREET ADDRESS		5.3 STREET ADDRESS	4881 GRIFFIN ROAD
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DAVIE FLA 33314
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	MARILYN BERKSON 101
STREET ADDRESS		6.3 STREET ADDRESS	4881 GRIFFIN ROAD
CITY-ST-ZIP		6.4 CITY-ST-ZIP	DAVIE FLA 33314

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 if changed, or on an attachment with an address.

SIGNATURE: *Margaret Mayes* DATE: 1-19-96 954-587-6410

CR2E037 (12/95)