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Apr 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N92000000354 (2)

1. Corporation Name

GREENFIELD HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4453 GREENFIELD AVE.  
SARASOTA FL 34236  
US

4411 BEE RIDGE RD.  
SUITE 132  
SARASOTA FL 34233-2514  
US

3. Date Incorporated or Qualified  
11/16/1992

3a. Date of Last Report  
04/17/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number  
65-0377587

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAM WELCH  
4453 GREENFIELD AVE.  
SARASOTA FL 34233

81 Name no change

82 Street Address (P.O. Box Number is Not Acceptable)

83

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:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  DELETE  
NAME WILLIAM WELCH  
STREET ADDRESS 4453 GREENFIELD AVE  
CITY - ST - ZIP SARASOTA FL

1.1 TITLE No change  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

TITLE D  DELETE  
NAME FILIC CHUNG  
STREET ADDRESS 4454 HOLLYBROOK WAY  
CITY - ST - ZIP SARASOTA FL

2.1 TITLE D  Change  Addition  
2.2 NAME Aida Florsheim  
2.3 STREET ADDRESS 4425 Greenfield Ave.  
2.4 CITY - ST - ZIP Sarasota, Fl. 34233

TITLE D  DELETE  
NAME BARBARA BEATTIE  
STREET ADDRESS 4449 GREENFIELD AVE.  
CITY - ST - ZIP SARASOTA FL

3.1 TITLE D  Change  Addition  
3.2 NAME Michael Acosta  
3.3 STREET ADDRESS 5208 Sunnydale Circle So.  
3.4 CITY - ST - ZIP Sarasota, Fl. 34233

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE  Change  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 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 in an attachment with an address.

SIGNATURE:

*William Welch*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 2, 1997 941-927-5055  
Date Daytime Phone # 0063059

CR2E037 (9/96)