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NONPROFIT CORPORATION ANNUAL REPORT



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

## 1996

N95000002033 (7) DOCUMENT #

ROS NO. 1887 NO. 1897 NO. 18	BETTER COMMUNITY DEVELOPMENT, INC.  Principal Place of Business Mailing Address									
3. Date hornwarder of Qualified   38. Date of Last Report				1 33162						
2. Principal Piece of Business   2. Mailing Address   2. Mailing Addr	NONTH MIAMI	BEACH FE 33102	HOUSE MINIMI DESCRIPT				3a. [	Date of Last I	Report	
27	2. Principal Pla	ce of Business	<del></del>					<del>   -</del>		
20	Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>B</b>			
Zep			hama *							
WILLINGER, SCOTT R 9181 N.W. 36TH STREET SUITE 100 MAMI FL 33166  11. Pursuit to provisions of Sockors 617,0502 and 617,1508. Florida Stalutes, the above named to apartic submits this statement for the purpose of changing its registered above. In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accord the populationed the registered office or registered above. As a provision of directors. I hereby accord the purpose of changing its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the populationed its registered office or registered above. As a provision of directors. I hereby accord the population its registered office or registered above. As a provision of directors. I hereby accord the population in the state of population and the population of directors. I hereby accord the population in the state of florids. Such as a population of directors. I hereby accord the population of dir		25	29	30		Florida Statutes	] No	No		
WILLINGER, SCOTT R 818 I N.W. 36TH STREET SUITE 100  MIAMIF L 33166  84 City  FL  85 Zip Code  11. Pursuant to the processors of Sections 617 0002 and 617.1506, Rodda Statutes, the above named comporation submits this statement for the purpose of changing its registered agent. or both, in the State of Rodda Statutes, the above named comporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the diplagation of, Section 617.0502 and 617.1506, Rodda Statutes, the above named comporation submits this statement for the purpose of changing its registered agent. I am familiar with and accept the diplagation of, Section 617.0503, The 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 diplagation of, Section 617.0503, The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a discount of the purpose of changing is registered agent. I am familiar with a discount of the discount of the discount of the discount of the purpose of changing is registered agent. I am familiar with a discount of the purpose of changing is registered agent. I am familiar and accept the discount of the purpose of changing is registered agent. I am familiar and accept the appointment as registered agent. I am familiar and accept the discount of the purpose of changing is registered agent. I am familiar and accept the discount of the purpose of changing is registered agent. I am familiar and accept the appointment as registered agent. I am familiar and accept the discount of the discou		9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered	Agent		
SUITE 100   MIAMI FL 33166   FL   85   Zip Code	WILLINGE	R, SCOTT R				xidress (P.O. Box Number is Not Acceptab	le)			
11. Pursuant to the provisions of Sections 617.0502 and 617.1509. Florida Statutes, the above named concoration submits this statement for the purpose of changing its registered agent. I am registered agent				83				<del></del>		
or registered agent, or both, in the State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. Such change was authorized by the Corporation's State of Horiza. State of H				1	' '			L	l	
12.	or registers	ad agent, or both, in the State of Florid	a. Such change was authoriz	ea by the con	named co poration's l	rporation submits this statement for the pur poard of directors. I hereby accept the appo	pose of cl pintment a	hanging its r as registered	egistered office ( agent. I am	
12.	SIGNATURE									
TITLE NAME CHISHOLM, DAVID SIREEL ADDRESS SIREEL ADDRESS TITLE NAME RANSOM, VELVA STREEL ADDRESS	Signature, typed or printed name of registered agent and title if applicable. (NOTE Re				Ediste par Adort a director activities areas					
NAME   STREET ADDRESS   1875 N. E. 168th St.   N. Miami Beach, Fla 33162     Addition	12.		<del></del>		т	ADDITIONS/CHANGES TO OFF	OF NS AN	Change		
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	44 11 11	by certify that the information supplied of	vith this filing is voluntarily fur	niebod and de	e not ous	alify for the exemption stated in Section 119	.07(3)(k), I	Florida Statu	tes. I further	

ceruty 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 concoration 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, it on an attachment with an address.

SIGNATURE: \_

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/96 305-354-4685 Dayline Prone Pr