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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEP**A**RTMENT OF STATE Sandr**a** B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 728282

(5)

| 1. Corporation | Name | • • | | | |
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| THE GA | ARDENS 105, INC. | | | | |
| Principal Place of | of Business | Mailing Address | | | DIŞA (181 BIBIL BIBI) DIBIL BIBIL BIBIL BIBIL BIBIL |
| 105 ELMWOOD CIR SEMINOLE FL 34647 | | 103 CLEVELAND AVE SW LARGO FL 34640 | | | |
| US | | US | | 3. Date incorporated or Qualified 01/18/1974 | 3a. Date of Last Report 02/17/1995 |
| 2. Principa! Pia | on of Rusiness | 2a. Mailing Address | | 4. FEI Number | Applied For |
| , <u> </u> | JELLAS BAYWAY | 26 114 PINELLA | & BAYWAY | 59-1506582 | Not Applicat |
| Suite, Apl. # | | Suite, Apt. #, etc. | ······································ | Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | 3. Certificate of Status Desired | Fee Required |
| City & State | | City & State | RDE FL | 6. Election Campaign Financing | \$5.00 May Be |
| | RA VERDE FL | 28 TIERRAVE | | Trust Fund Contribution | A0060 to Fees |
| Zip 24) 337 | Country US | 29 33715 3 | Country VS | B. This corporation has liability to Florida Statutes | or intangible tax under s. 199.032, |
| 24 551 | 9, Name and Address of Curre | | 30 | 10. Name and Address of New | _ |
| | g, Name and Address of Odific | in Hogistores Agent | 81 Name | | <u> </u> |
| HAUSER, RICHARD B | | | 99 Stephel A | REDA ALBERTO | able) . |
| | I, NICHAND B EVELAND AV SW | | 82 Street Address P.O. Box Number is Not Accepted | | WAY |
| | ST BAY DR, STE. #4 | | 83 | | |
| | FL 34640 | | 84 City | | 85 Zip Code |
| | | | | TIERRA VERDE | FL 1/537+1 |
| | a the provisions of Sections 617.050 | 02 and 617.1508, Florida Statutes, | the above-named cor | rporation submits this statement for the p | ourpose of changing its registered of |
| 11. Pursuant to | o the brokerous or peoploins of used | | | mam ni nijecicis. Tiereby accept tre at | politiment as registered agents i ar |
| 11. Pursuant to or registere familiar with | ed agent, or both, in the State of Flor h. and accept the obligations of, Sec | etion 6#7.0503, Florida Statutes. | by the corporation sit | , | |
| CACKIATURE | o the provisions of Sections 617.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec | com MISERTO | (neon n | LANAGEK. | 4/10/96 |
| CACKIATURE | Signature, typed or printed name of registered ager | of HISE/CTO int and titlo il applicable NOTE: | Registered Agent signature re | (ANAGEK. | DATE TO |
| SIGNATURE | Signature, typed or printed name of registered ages OFFICERS AP | ont and title if applicable NOTE: ND DIRECTORS | Registered Agent signature re | (LAN AG-E/K- quirod when reinstating) ADDITIONS/CHANGES TO O | DATE THE PROPERTY OF THE PROPE |
| SIGNATURE | Signature, typed or printed name of registered age OFFICERS AI | of HISE/CTO int and titlo il applicable NOTE: | Registered Agent signature re 13. 1.1 TITLE | A A A G E-K- quirud when reinstating. ADDITIONS/CHANGES TO OI | T / 1-0 7 7 7 7 7 7 7 7 7 |
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SIGNATURE:

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Daytime Phone #