

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **712683** (2)

1. Corporation Name

GEORGIAN COURT APARTMENT NORTH, INC.

Principal Place of Business

Mailing Address

**6280 N. E. 18TH AVENUE
FORT LAUDERDALE FL 33334**

**6261 N.E. 19 AVE.
#1203
FT. LAUDERDALE FL 33308
US**

2. Principal Place of Business

2a. Mailing Address

21 6261 N.E. 19th Ave.

26 Suite, Apt. #, etc.

22 #1203

27 Suite, Apt. #, etc.

City & State

City & State

23 Ft. Lauderdale, FL

28 City & State

24 Zip 33308

Country

25 Broward

29 Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/04/1967

4. FEI Number

59-1216082

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

Name and Address of New Registered Agent

**RYAN, EDWARD J
6261 N.E. 19TH AVE.
#1203
FT LAUDERDALE FL 33308**

81 Name

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

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RYAN, EDWARD J	
STREET ADDRESS	6261 N.E. 19TH AVE., #1203	
CITY-ST-ZIP	FORT LAUDERDALE FL	

TITLE	V/D	<input checked="" type="checkbox"/> DELETE
NAME	RYAN, EDWARD	
STREET ADDRESS	6263 N. E. 18TH AVENUE #912	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	

TITLE	T/D	<input checked="" type="checkbox"/> DELETE
NAME	LUCIANO, CAROLE	
STREET ADDRESS	6263 N. E. 18TH AVENUE #923	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DIXON, DANIEL	
STREET ADDRESS	6261 N.E. 19TH AVE., #1203	
CITY-ST-ZIP	FORT LAUDERDALE FL	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BAILEY, GARETTA	
STREET ADDRESS	6261 N.E. 19TH AVE., #1203	
CITY-ST-ZIP	FORT LAUDERDALE FL	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MECCIA, MARIE	
STREET ADDRESS	6261 N.E. 19TH AVE., #1203	
CITY-ST-ZIP	FT. LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Ryan, Edward J	
1.3 STREET ADDRESS	6263 N.E. 19th Ave. #912	
1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	McGrath, S. Jake	
2.3 STREET ADDRESS	6260 N.E. 18th Ave. #805	
2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334	

3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Wilcox, Robert E.	
3.3 STREET ADDRESS	6263 N.E. 19th Ave. #1001	
3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Dixon, Daniel	
4.3 STREET ADDRESS	6260 N.E. 18th Ave. #804	
4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334	

5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Prindeville, Marguerite	
5.3 STREET ADDRESS	6263 N.E. 19th Ave. #911	
5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Bracken, John	
6.3 STREET ADDRESS	6261 N.E. 19th Ave. #1102	
6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

14. I 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 on an attachment with an address.

SIGNATURE:

Edward J. Ryan

4/20/98

(954) 771-7562

CP2E037 (10/97)

Georgian Court Apartments North, Inc.

Additional Officer:

D	Addition
David Cummings	
6263 N.E. 19th Ave. #1021	
Ft. Lauderdale, FL 33308	