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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 291163

(4)

Mailing Address

SEMINOLE GARDENS APARTMENT NO.1-A, INC.

FILED Mar 19 1997 8:00am Secretary of State

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8330 112TH ST. N. SEMINOLE FLORIDA 34642		8330 112TH ST. N. SEMINOLE FLORIDA 33772-4207						
				3. Date Incorporated or Qualified 03/22/1965		3a. Date of Last Report 04/15/1996		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	-		lied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1115156		Not <i>P</i> 3.75 Add	Applicable	
Suite, Apt.	F, OLC.				5. Certificate of Status Desired	1 1 7 7	5.75 Adı Fee Regu	
City & State		City & State			6. Election Campaign Financing		5.00 м	
23		28			Trust Fund Contribution		Added to	
Zip	Gountry	Zib	Count	у	8. This corporation has liability for	intangible tax u	nder s. 1	99.032,
24 3377		29	30			Yes No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	<u>t</u>	
	LES, ROBERT G.		8	i Name				
	112TH ST N		8	2 Street A	Address (P.O. Box Number is Not Acceptal	ole)		
SEMI	NOLE FL 34642		ļ <u>.</u>	J				
			8	1				
			8	1 City		-, 85	Zip Co	ode
				.1		FL	337	ソフム
11. Pursuant t	o the provisions of Sections 607.050 egistered agent, or both, in the State	i2 and 607.1508, Florida Stati - of Florida. Such change was	utes, the abo s authorized b	ve-named o by the corp	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose or chan pt the appointm	igirig its i ient as re	registerea igistered
agent. I ai	m familiar with, and accept the oblig-	ations of, Section 607.0505, f	lorida Statut	08.				-
SIGNATURE			an and a mar			DATE		
12.	Signature, typed or printed natur of registered age OFFICERS AN		13.	gent signature i	required when reinslating) ADDITIONS/CHANGES TO OFFIC		ECTORS	IN 12
TITLE	P	DELETE	1.1 1111.6	т	ABBITIONO/OFFAIRALO TO OFFI	1 0		Addition
NAME T	DECKER, CARL		1,2 NAM		Stanley Fisher	X-		
STREET ADDRESS	8330 112TH ST N			L ADDRESS	Stanley Fisher			
******	SEMINOLE, FL 00000		1.3 STN:					
CITY-ST-ZIP TITLE	V	DELFTE	2.1 TILLE	31-21			Change	Addition
NAME	LOBUE, FRANK	_	2.2 NAM					
STREET ADDRESS	8330 112TH ST N		2.3.5186	ET ADDRESS				
CITY-ST-ZIP	SEMINOLE, FL 00000		2. 4 DITY					
TITLE	ATAS	DEEFTE	3.1 TITLE			* 0	hange	Add tion
NAME 4	REILLY: RUTH		3.2 NAM	:	Evolyn Fisher			
STREET ADDRESS	8330 112TH ST N		3 3 SIRE	T ADDRESS				
CITY-ST-ZIP	SEMINOLE, FL 00000		3.4. C•TY	- ST- ZIP				
TITLE	VP	DELETE	4 1 1171.	···-		* 0	hange	Addition
NAME .	FISHER, STANLEY		4 2 NAM	r i	Ruth Reilly			
STREET AODRESS	8330 112TH ST N		4 3 STHE	ET ADDRESS	_			
CITY-ST-ZIP	SEMINOLE, FL 00000		4.4 CHY	- S1 - 2IP				
TITLE	ST	DELFTE	5.1 1111.6				Change	Addition
NAME	WATKINS, MILDRED		5.2 NAM					
STREET ADDRESS	8330 112TH ST N		5.3 S1RF	LLADDRESS				
CITY-ST-ZIP	SEMINOLE, FL 00000		5.4 CITY	ST-ZIP				
TITLE	* · · · · · · · · · · · · · · · · · · ·	DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAM					
STREET ADDRESS			6.3 S188	ET ADORESS				
CITY-ST-ZIP			6.4 CHY	- \$1 - <i>21</i> P				
14. I do herel	by certify that the information supplies	d with this filling does not qua	alify for the ex	cemption st	lated in Section 119.07(3)(i), Florida Statulo that my signature shall have the same leg	es. I further certi	ify that th ade undr	i€ er path: th¢
I am an o	fficer or director of the corporation or	r the receiver or trustee empg	pwered to exe	oute this r	eport as required by Chapter 607, Florida	Statutes; and th	at my nar	me
a ppears i	n Block 12 or Block 13 if changed, o	r on an attachment with an a	ddress.	/	1 /			