FILP NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997

Principal Place of Business

The second secon



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # 300522

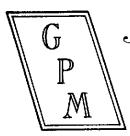
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Mailing Address

GREYNOLDS PARK MANOR, INC.

FILED
Apr 24 1997 8:00am
Secretary of State

17400 WEST DIXIE HWY NORTH MIAMI BEACH FL 33160		17400 WEST DIXIE HWY NORTH MIAMI BEACH FL 33180-4818							
						3. Date Incorporated or Qualified 01/06/1966		te of Last R 19/1996	eport
	ace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	oplied For
21		26				59-1213263			ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & State	3	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Cauntry	7ip	Cou	ntry		8. This corporation has liability for i	ntangible	tax under s	. 199.032,
24	25	29	30] Yes [
	9, Name and Address of Current	Registered Agent		<u> </u>		10. Name and Address of New Re	gistered /	Agent	
	DER,GEORGE N		ĺ	81	Name				
	00 W DIXIE HWY			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
N M	IAMI BCH. FL 33160		}	83					
			Į						
			Ī	84	City		FL	85 Zip	Code
agent, I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obliga	and 607,1508, Florida Statu of Florida Such change was lions of, Section 607,0505, F	utes, the ab authorized Torida Stati	L. 10v0- 1 by t utes	named corp the corporati	oration submits this statement for the pon's board of directors. I hereby accept		changing it ointment as	ts registered registered
SIGNATURE	Signature typed or printed name of registered agen	if and tille Aapp scable (NO	H : Registerea	Aprini	t signature require	ed when reinstating)	DATE	····	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	}S IN 12
TITLE	PD	DELETE	11111	t l				Change	Addition
NAME	LEADER,GEORGE N		1.2 NA	ME	ļ				
STREET ADDRESS	17400 W. DIXIE HWY.		1.3 STI	RELLA	DDRESS				!
CITY-ST-ZIP	N MIAMI BEACH FL		1.4 CII	Y-S1-	7IP				
TITLE	\$D	☐ DELETE	. 2.1 117	LE	İ			☐ Change	Addition
. NAME	LEADER, DIANA		2 2 NA	MI.					
STREET ADDRESS	17400 W. DIXIE HWY.		2.3 ST	REET A	DORESS	•			į
CITY-ST-ZIP	N MIAMI BEACH FL		2. 4 CI		· ZiP			<u> </u>	
TITLE	D D	DELETE	3.1 1/1					L Change	☐ Addition
NAME	CASPER, MARTIN E		. 3 2 NA						
STREET ADDRESS	17400 W DIXIE HWY				DDRESS				
CITY-ST-ZIP	N MIAMI BCH, FL 00000	DELETE	3 4. 01		· ZiP			TT Channe	Latel Co.
TITLE	LEADER, MICHAEL	L.I VIIII	4.1 111		1			Change	Addition
NAME CTREET ADDRESS	17400 WEST DIXIE HIGHWAY		4. 2 NA		tippene				ļ
STREET ADDRESS CITY-ST-ZIP	N. MIAMI BEACH FL				DDRESS				ļ
TITLE	D D	DELETÉ	4.4 CIT		700			Change	Addition
NAME	LEADER, ROBIN	La section	5 2 NA	-	. .			err country	[1000,0]
STREET ADDRESS	17400 W. DIXIE HWY				DDRESS				
CITY-ST-ZIP	N MIAMI BEACH FL		- 1	Y-SI-		•			
TITLE	** **** **** **** * **** * **** * **** *	☐ DELETE	6118		*"			Change	Addition
NAME			62 NA					0 *	
STREET ADDRESS					DURESS				
CITY-ST-ZIP			64 01		1				
14. I do hereb	oy certify that the information supplied in indicated on this annual report or string flicer or director of the corporation of in Block 12 or Block 13 if changery or	with this filing does not que upplemental annual caper's the receiver or trusts empo on an attachment with an ac	lify for the	exem	notion stated	in Section 119.07(3)(i), Horida Statutes my signature shall have the same lega Las required by Chapter 607, Florida S	s. I further l effect as tatules; a	certify that if made un nd that my r	the der oath, that name
SIGNAT	LIDE:	CHAXIXX U	K	\		ו דמומוע	205	OUL-)3/ /



Greynolds Park Manor, Inc.

Nursing, Convalescent and Rehabilitation Center 17400 West Dixie Highway North Miami Beach, Florida 33160 (305) 944-2361 Fax: (305) 949-9464

April 17, 1997

Division of Corporations Annual Reports Section Post Office Box 1500 Tallahassee, Florida 32302-1500

RE: GREYNOLDS PARK MANOR, INC. FEI NUMBER: 59-1213263

Dear Sir/Madam:

Enclosed please find 1997 Profit Corporation Annual Report Form along Greynolds Park Manor, Inc. check no. 32156 in the amount of \$165.00 as requested.

If you require additional information, please contact me.

Very truly yours, GREYNOLDS PARK MANOR, INC.

Martin E. Casper Executive Director

MEC/mab