

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 704227 (8)

1. Corporation Name
SECTION FOUR MAINTENANCE CORP., INC.



Principal Place of Business: 2A61 N.W. 14TH PLACE LAUDERHILL FL 33313 US
Mailing Address: 5261 N.W. 14TH PLACE LAUDERHILL FL 33313 US

3. Date Incorporated or Qualified: 06/27/1962
3a. Date of Last Report: 03/22/1995

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: 59-1022297 Applied For: Not Applicable
5. Certificate of Status Desired: [X] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [] Yes [X] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

L'HOMME, RAMLOCHAN D
5820 N.W. 12TH ST
SUITE D
FT LAUDERDALE FL 33313

81 Name: LOYD STANLEY
82 Street Address (P.O. Box Number is Not Acceptable):
83 2812 NW 108 AVE
84 City: SUNRISE FL 85 Zip Code: 33322

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: *Lloyd Stanley* PRES/ DATE: 1.18.96

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	JACKSON, THERESA	
STREET ADDRESS	8590 SUNRISE LAKES BLVD	
CITY - ST - ZIP	FT LAUDERDALE FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	L'HOMME, RAMLOCHAN DIAN	
STREET ADDRESS	5820 NW 12TH ST., D.	
CITY - ST - ZIP	FT LAUDERDALE FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WALME, SERGE	
STREET ADDRESS	5261 N.W. 14TH PLACE	
CITY - ST - ZIP	FT. LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CAMERON, VICTOR	
STREET ADDRESS	5920 NW 12TH ST D	
CITY - ST - ZIP	FT LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WALME, SERGE	
STREET ADDRESS	5261 NW 14TH PLACE	
CITY - ST - ZIP	LAUDERHILL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	JACKSON, THERESA	
STREET ADDRESS	8590 SUNRISE LAKES BLVD	
CITY - ST - ZIP	FT. LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	LLOYD STANLEY	
1.3 STREET ADDRESS	2812 N.W. 108 AVE	
1.4 CITY - ST - ZIP	SUNRISE FL. 33322	
2.1 TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BERNADINE LARONDE	
2.3 STREET ADDRESS	5920 N.W. 12 ST #H	
2.4 CITY - ST - ZIP	SUNRISE 33313	
3.1 TITLE	ST	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	WALME SERGE	
3.3 STREET ADDRESS	5261 N.W. 14 TH PL.	
3.4 CITY - ST - ZIP	FT. LAUDERDALE FL.	
4.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Cameron, victor	
4.3 STREET ADDRESS	5920 N.W. 12ST #D	
4.4 CITY - ST - ZIP	Fort. laud. FL. 33313	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	LOCITE THOMAS	
5.3 STREET ADDRESS	5920 N.W. 12 ST #	
5.4 CITY - ST - ZIP	SUNRISE FL. 33313	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	LLOYD STANLEY	
6.3 STREET ADDRESS	2812 N.W. 108 AVE	
6.4 CITY - ST - ZIP	SUNRISE FL 33322	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE: *Lloyd Stanley* PRES/ LLOYD STANLEY 1.18.96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 954) 9/61-6082

CR2E037 (12/95)