SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

Jul 31 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 **DIVISION OF CORPORATIONS** DOCUMENT # (6) CORINTHIAN GARDENS, INC. Principal Place of Business Mailing Address 501 S. W. 11TH PLACE 501 S. W. 11TH PLACE **BOCA RATON FL 33432 BOCA RATON FL 33432** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 09/09/1970 05/14/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-1452317 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Ernest W. Willis ELLIS, JAMES F Street Address (P.O. Box Number is Not Acceptable) 82 501 S W 11TH PLACE c/o Beacon Property Management. 83 **BOCA RATON FL 33432** 500 E. Spanish River Blvd. 84 City Boca Raton 85 Zip Code 33431 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 affine 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. ame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. X DELETE Change X Addition 11 TITLE TITLE Imogene Vanzee NAME HOLLAND, THOMAS 1.2 NAME 501 SE 11th Pl., #105A 501 S W 11TH PLACE APT 103A STREET ADDRESS 1.3 STREET ADDRESS Boca Raton, FL 33432 **BOCA RATON FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change X DELETE **Addition** TITLE PD 2.1 TITLE James Leet NAME **ELLIS, JAMES** 2.2 NAME 501 SW 11th P1, #115C 501 SW 11TH PLACE APT. 104A STREET ADDRESS 2.3 STREET ADDRESS Boca Raton, FL 33432 **BOCA RATON FL** 2.4 City-St-ZiP CITY-ST-ZIP DELETE X Change TITLE 3.1 TITLE Addition PHILIP, VIOLA 3.2 NAME NAME STREET ADDRESS 501 SW 11TH PLACE 3.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP X DELETE Change X Addition TITLE 4.1 TITLE Byth Gook 501 sw 11th P1. #212B NAME WILSON, CAROLE 4.2 NAME Boca Raton, FL 33432 STREET ADDRESS 501 S W 11TH PLACE 4.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP X DELETE Change X Addition TITLE 5.1 TITLE Ed Dougherty NAME DALEY, SHERMAN 5.2 NAME 501 SW 11th P1 #204A STREET ADDRESS 501 SW 11TH PLACE APT. 114C 5.3 STREET AODRESS Boca Raton, FL 33432 CITY-ST-ZIP <u>Boca raton fl</u> 5.4 CITY-ST-ZIP X DELETE Change Addition 6.1 TITLE TITLE NAME SOUTHWICK, GEORGE 6.2 NAME STREET ADDRESS 501 W 11TH PL, APT 408B **6.3 STREET ADDRESS** CITY-ST-ZIP **BOCA RATON FL** 6.4 CITY-ST-ZIP 14. I do 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 31 changed, or on an attachment with an address.

FILED