FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

720975

(2)

THE GREENHOUSE OF TENDER GRAPES, INC.

								+
Principal Place	e of Business	Mailing Add	ress					
121 NW 36TH S FT LAUDERDALI	ST E FL 33309-5215	121 NW 36TH ST FT LAUDERDALE FL 33309-5215						
						3. Date Incorporated or Qualified 05/17/1971	3a. Date of Las 02/27/1	
2. Principal Pl	lace of Business	2a. Mailing A	\ddress	······································		4. FEI Number	h	Applied For
21		26	Suite, Apt. #, etc.			23-7116223		Not Applicable
Suite, Apt.	#, etc.	— — · ·	ot. #, etc.			5. Certificate of Status Desired	1 4	5 Additional Required
City & State	9	27 City & Str	ate			6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Zip		Country		8. This corporation has liability for I		er s. 199.032,
24	25	29	30	0			Yes No	
	9, Name and Address of Curre	ant Registered Age	ent	61	Name	10. Name and Address of New Re	Jistered Agent	
12711 1 4 4 4 4	0 050410 81							
	IS, GERALD N. 36TH ST		62 Street Ad			ddress (P.O. Box Number is Not Acceptable)		
	AUDERDALE FL 33309			83				
1011112	TOPENDALE I E COCCO			84	City		85 Z	Zip Code
					- "		FL	
11. Pursuant to office or re	to the provisions of Sections 617.05 egistered agent, or both, in the Sta	502 and 617.1508, F ite of Florida. Such (Florida Statutes, change was aut	, the above thorized by	e-named ∈ / the corp	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing the appointment.	g its registered as registered
agent. I a	m familiar with, and accept the obli	igations of, Section	617.0503, Florid	da Statute:	S.			-
SIGNATURE	Signature, typed or printed name of registered a	edent and title if annicable	(NOTE: F	Penistered An	ani simpature	equired when reinstating)	DATE	
12.		ND DIRECTORS	(4016.1	13.	on bigitatore	ADDITIONS/CHANGES TO OFFIC		IORS IN 12
TITLE	PD	Γ	DELETÉ	1.1 TITLE			☐ Chang	ge Addition
NAME	SCHMIDT, VIRGINIA			1.2 NAME	ŀ			
STREET ADDRESS	RT. 2, BOX 504			1.3 STREET	ADDRESS			
CITY - ST - ZIP	Brevard NC			1.4 CITY - S	ST-ZIP			
TITLE	VD	L	DELETE	2.1 TITLE			☐ Chang	ge Addition
NAME	WILLIAMS, GERALD N			2.2 NAME				
STREET ADDRESS	161 NW 36TH STREET FT. LAUDERDALE FL				ADDRESS			
CITY-ST-ZIP TITLE	STD		DELETE	2.4 CITY- 3.1 TITLE	51-ZIP		Chang	ge Addition
NAME	WILLIAMS, SUSAN	_		3.2 NAME				
STREET ADDRESS	161 N.W. 36TH STREET			3.3 STREE	ADDRESS			
CiTY-ST-ZIP	FORT LAUDERDALE FL			3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			Chan	ge Addition
NAME				4. 2 NAME			•	
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-	ST-ZIP			
TITLE		L	DELETE	5.1 TITLE	ì		Chan	ige Addition
NAME				5.2 NAME				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP TITLE		Г	DELETÉ	5.4 CITY-: 6.1 TITLE	S1-ZIP		Chan	nge Addition
NAME		L	_,	6.2 NAME			Land Villary	and terminon
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				6.4 CITY-:				
14. I do herel	by certify that the information suppl	lied with this filing d	loes not qualify	for the ex	emption s	ated in Section 119.07(3)(i), Florida Statute	s. I further certify t	hat the
informatio	on indicated on this annual report of officer or director of the corporation	r supplemental anni or the receiver or tr	ual report is trui rustee empower	e and acc red to exe	urate and cute this r	that my signature shall have the same lega aport as required by Chapter 617, Florida S	и епест as if made Statutes; and that r	i under oath; that ny name
appears i	in Block 12 or Block 13 if changed,	, or on an attachmer	nt with an addre	988.		- ,		

21,0197 954-561-1122 Date 954-561-1122

FILED

Feb 17 1997 8:00am

Secretary of State