## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 23, 2004 8:00 am Secretary of State 04-23-2004 90197 047 \*\*\*\*61.25

DOCUMENT # 722223  1. Entity Name GREEN HAVEN 12 MAINTENANCE CO., INC.							04-2.	3-2004 90197 047 *	***61.2:	5
Principal Plac 8500 N.W. 5 TAMARAC, FL	7TH CT.	s	850	Mailing Address 8500 N.W. 57TH CT. TAMARAC, FL 33321						
2. Principal Place of Business				iling Address	<del></del>					
Suite, Apt. #, etc.				uite, Apt. #, etc.			04202004 Ch	g-NP CR2E037	(10/03)	
City & State			City & State				4. FEI Number         Applied For           59-1445157         Not Applicable			
Zip				p 	Cou	intry	5. Certificate of Status Desired See Required Fee Required			
<u> </u>	6. Name	and Address of Current	Register	ed Agent		Name	7. Name and Address of New Registered Agent			
SCHNAITMAN, TRACEY S V.I.P. MGMT CORP_						Street Address (P.O. Box Number is Not Acceptable)				
2531 ARAGON BLVD SUNRISE, FL 33322										
					_	City	FL Zip Code			
8. The above named entity subpries this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
Filing Fee is \$61.25 Due by May 1, 2004				9. Election Car Trust Fund (		ion. 🔲	\$5.00 May Be Added to Fees	Make check p Florida Departm	nent of St	ate
10.		OFFICERS AND DIF	RECTORS		11.		ADDITIONS/CHANGE	S TO OFFICERS AND DIRE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZANGAR 5804 NW TAMARA	·		☐ Delete				l	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROBERT, NANCY 8507 NW 57 PL TAMARAC, FL 33321			■ <sup></sup>		J		Ī	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5718 NW	MAN, BEA 85TH AVE. C, FL 33321		☐ Delete		į.			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PAUL 87TH AVE. C, FL 33321	-	☐ Delete	•	1		[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5806 N.W	I, ROBERT V. 87 TERRACE IC, FL 33321		Delete				[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	CITY	EET ADDRESS -ST-ZIP			Change	Addition
12. I 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 report or supplied entail 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.										