

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 # 731413

(1)

1. Corporation Name

APPLE CREEK UNIT FOUR, INC.



Principal Place of Business

**7301 W SUNRISE BLVD
PLANTATION FL 33313
US**

Mailing Address

**7301 W SUNRISE BLVD
PLANTATION FL 33313
US**

3. Date Incorporated or Qualified
12/12/1974

3a. Date of Last Report
07/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1698254

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

23

City & State

28

City & State

24

Zip

Country

29

Zip

Country

5. Certificate of Status Desired

☐ **\$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 ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SPRADUN, JOAN A
7363 D1 W SUNRISE BLVD
PLANTATION FL 33313**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

[Signature]
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7/22/96

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MORGAN, JON ANN
STREET ADDRESS 7361-C1 W SUNRISE BLVD
CITY-ST-ZIP PLANTATION FL ☒ DELETE

TITLE TD
NAME HAMILTON, TIM
STREET ADDRESS 7349 W. SUNRISE BLVD
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE DS
NAME SPRADUN, JOAN
STREET ADDRESS 7363 D-1 W. SUNRISE BLVD.
CITY-ST-ZIP PLANTATION FL ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PD
12 NAME SEARS, JOHN ☐ Change ☒ Addition
13 STREET ADDRESS 7347 W. SUNRISE BLVD
14 CITY-ST-ZIP PLANTATION, FL 33313

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE D
32 NAME BROWNING, RICHARD ☐ Change ☒ Addition
33 STREET ADDRESS 7341 W. SUNRISE BLVD
34 CITY-ST-ZIP PLANTATION, FL 33313

41 TITLE D
42 NAME ZIDAR, MARK ☐ Change ☒ Addition
43 STREET ADDRESS 7333 W. SUNRISE BLVD
44 CITY-ST-ZIP PLANTATION, FL 33313

51 TITLE DS
52 NAME LONDON, GARY ☐ Change ☒ Addition
53 STREET ADDRESS 7361-B2 W. SUNRISE BLVD
54 CITY-ST-ZIP PLANTATION, FL 33313

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

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 on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/96
DATE

797-7511
Daytime Phone #

CR2E037 (12/95)