

FILE NOW: FILING FEE IS \$61.25

1-2

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **733933** (6)
1. Corporation Name
TREE GARDEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: P O BOX 100546 FT. LAUDERDALE FL 33310
Mailing Address: P O BOX 100546 FT. LAUDERDALE FL 33310

3. Date Incorporated or Qualified: **09/25/1975**
3a. Date of Last Report: **02/28/1995**
4. FEI Number: **59-1725488**
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
SANTOS, ROBERT
1790 NW 55 AVE. NO. 203
LAUDERHILL FL 33313

10. Name and Address of New Registered Agent (81-84)
81 Name: [Blank]
82 Street Address (P.O. Box Number is Not Acceptable): [Blank]
83: **300001851573**
84 City: **06/05/96 01031 022**
85 Zip Code: *****61.25 FL**

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	VAUGHANS, JEEDEAN	
STREET ADDRESS	1748 NW 55 AVENUE #202	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	MCCLEARY, JAMES E	
STREET ADDRESS	180 S UNIVERSITY DR SUITE C	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCDONOUGH, RICHARD	
STREET ADDRESS	4330 SW 82ND WAY	
CITY-ST-ZIP	DAVIE FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SANTOS, ROBERT	
STREET ADDRESS	1790 NW 55TH AVE #203	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MAXSTADT, OSCAR	
STREET ADDRESS	5460 CYPRESS RD	
CITY-ST-ZIP	PLANTATION FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	7441 NW 4th Street	
2.4 CITY-ST-ZIP		
3.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	8747 S Crescent Drive	
4.4 CITY-ST-ZIP	Miramar, FL	
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Melinda A. McCleary	
6.3 STREET ADDRESS	7441 NW 4th Street	
6.4 CITY-ST-ZIP	Plantation, FL 33317	

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: _____ DATE: 4/26/96 DAYTIME PHONE #: 954-731-2875

CR2E037 (12/95)

733933

202

Tree Garden Condominium Association, Inc.
P.O. Box 100546
Fort Lauderdale, Florida 33310-0546
954-731-2875

Document # 733933

ADDITIONAL DIRECTORS 1996

Ian Carter	217 Northwest 42 Terrace Plantation, Florida 33317
Brian Friedman	11583 Northwest 2nd Street Plantation, Florida 33325
Arthur McQueen	114 Rosehill Terrace Yonkers, New York 10703
Floyd Robertson	3013 Midland Place Miramar, Florida 33025
Isylin Santos	8747 South Crescent Drive Mirmar, Florida 33025
M. William Ullman	5460 Cypress Road Plantation, Florida 33317
Paul Weiss	1330 Northwest 94th Terrace Plantation, Florida 33322