## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION O	F CORPORATIONS			
DOCU 1. Corporation	MENT # 73740	5 (1)				
GEMIN	II IV TOWNHOUSE ASSOC	IATION, INC.				
					)	81811 91811 1881
Principal Plac	e of Business	Mailing Address				
3205 BIRD AVE 3206 BIRD AVE				į		
MIAMI FL 33133 MIAMI FL 33133						
US		US		3. Date Incorporated or Qualified	3a. Date of Last	Renort
				12/01/1976	05/01/1	
	Place of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		59-1781852		Not Applicable
22		27		<ol><li>Certificate of Status Desired</li></ol>		5 Additional Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.0	May Be
23		28		Trust Fund Contribution		d to Fees
Zip 24	Country 25	Zip <b>29</b>	Country	8. This corporation has liability for inta		199.032,
	9. Name and Address of Curre		[30]	Florida Statutes  10. Name and Address of New Reg	Yes No	
			81 Name		iotorou rigotti	
HART, FRED 82 Street A				ddress (P.O. Box Number is Not Acceptable)		
3205 BIRD AVE				and only ( 10. Den 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		
MIAMI FI	L 33133		83			
			84 City		85 Zg	p Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508 Florida Statut	es, the above-pamed corr	Coration submits this statement for the surro	FL 85 25	oniotored affine
or registe familiar w	red agent, or both, in the State of Flor	rida. Such charge was authorized	red by the corporation's b	oporation submits this statement for the purpolar oard of directors. I hereby accept the appoint	ment as registered	agent. I am
SIGNATURE	in, and accept the tongan arou, sec	Company Control of Con	».	3	20/96	
			OTE: Registered Agent signature req	uired when reinstating)	DATE DATE	<del></del>
12.	PTD OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
NAME	HART, FREDERICK	□ D€LETE	1.1 TITLE 1.2 NAME	Vie Pres, D Millie Betancourt	Change	Addition
STREET ADDRESS	3205 BIRD AVE		1.3 STREFT ADDRESS	3211 Bird Ave		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-SI-ZIP	MIAMI F1 33133		
TITLE	SD	DELETE	2.1 TITLE		☐ Change	Addition Addition
NAME	MCKITTERICK, RUSSELL		2.2 NAME			
STREET ADDRESS	3217 BIRD AVENUE MIAMI FL		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	VD VD	<b>∑</b> €LETE	2. 4 CITY - ST - ZIP 3.1 TITLE			
NAME	REDDICK, DAVID	<b>Japan</b>	3.1 TITLE 3.2 NAME		☐ Change	Addition Addition
STREET ADDRESS	3203 BIRD AVE		3 3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL		3.4. CITY-ST-ZIP			
TITLE		□DELETE	4.1 TITLE		☐ Change	Addition
NAME CYREET ADDRESS			4. 2 NAME			
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS			
TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			☐ Accition
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			54 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		☐ Change	Addition
NAME CIDEET ADDRESS			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP 14. I do hereb	y certify that the information supplied	with this filing is voluntarily furn	6.4 CITY-ST-ZIP ished and does not qualify	for the exemption stated in Section 119.07(	3)(k) Florida Statute	es I further
oath: that	LUB MOHNAUCH MOGAGED ON MIS ANN	ual report or supplemental anni oration or the receiver or truster	ual report is true and accu e empowered to execute t	rate and that my signature shall have the san this report as required by Chapter 617, Florida	an Innal official on if	المسامين مامين

SIGNATURE: \_

SIGNATURE AND FOED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR HART 3/20/96