

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 737793 (0)

1. Corporation Name

SPRINGBROOK GARDENS, INC., A CONDOMINIUM



Principal Place of Business

125 N BIRCH RD., #404  
FT LAUDERDALE FL 33304  
US

Mailing Address

C/O W. A. HALLMAN  
816 W. SHORE DR.  
BRIGANTINE NJ 08203  
US

3. Date Incorporated or Qualified  
01/11/1977

3a. Date of Last Report  
05/01/1995

4. FEI Number  
59-1809263

Applied For  
Not Applicable

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALLMAN, WILLIAM A.  
125 N. BIRCH RD. #404  
FT. LAUDERDALE FL 33304

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME CHILDS, BLANCHE  
STREET ADDRESS 125 N BIRCH RD. #401  
CITY-ST-ZIP FT. LAUDERDALE FL ☒ DELETE

TITLE D  
NAME HALLMAN, WILLIAM A.  
STREET ADDRESS 125 N BIRCH RD #404  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

TITLE D  
NAME SOMERVILLE, PAT  
STREET ADDRESS 125 N BIRCH RD. #304  
CITY-ST-ZIP FT LAUDERDALE FL ☐ DELETE

TITLE D  
NAME ANDERSON, TOM  
STREET ADDRESS 125 N BIRCH RD #301  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME GEORGE JONES  
1.3 STREET ADDRESS 125 N BIRCH RD #203  
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33304 ☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 and typed or printed name of signing officer or director

4-12-96 604-266-9600  
Date Daytime Phone #

CR2E037 (12/95)