

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 # 746312

1. Corporation Name

GRIFFIN MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2300 GRIFFIN RD. LOT 153
FORT LAUDERDALE, FA
33 312

100001763711
-04/01/96--01009--013
***66.25

200001763712
-04/01/96--01009--014
***66.25

3. Date of Incorporation or Qualified
03 - 19 - 1979

3a. Date of Last Report

1995

4. FET Number

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LORENZO GIRARD
2300 GRIFFIN RD
FORT LAUDERDALE

81. Name

DOMINIQUE CORRIVEAU

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

2300 GRIFFIN RD

83.

LOT 176

84. City

FORT LAUDERDALE

FL

85. Zip Code

33 312

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

D. CORRIVEAU

P

FEB 17, 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	☒ DELETE
NAME	LORENZO GIRARD	
STREET ADDRESS	2300 GRIFFIN RD	
CITY-ST-ZIP	FORT LAUDERDALE FA	
TITLE	T	☒ DELETE
NAME	Ms. K. BODEAU	
STREET ADDRESS	2300 GRIFFIN RD	
CITY-ST-ZIP	FORT LAUDERDALE	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☒ DELETE
NAME	MRS DIANE SAMPSON	
STREET ADDRESS	2300 GRIFFIN RD LOT 110	
CITY-ST-ZIP	FORT LAUDERDALE FA 33312	

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	DOMINIQUE CORRIVEAU	
1.3 STREET ADDRESS	2300 GRIFFIN RD	
1.4 CITY-ST-ZIP	FORT LAUDERDALE 33 312	
2.1 TITLE	V-P	☐ Change ☒ Addition
2.2 NAME	J-M HARVEY	
2.3 STREET ADDRESS	2300 GRIFFIN RD LOT 40	
2.4 CITY-ST-ZIP	FORT LAUDERDALE FA 33312	
3.1 TITLE	T	☒ Change ☐ Addition
3.2 NAME	RAY DUSSEAU	
3.3 STREET ADDRESS	2300 GRIFFIN RD. LOT 48	
3.4 CITY-ST-ZIP	FORT LAUDERDALE FA 33 312	
4.1 TITLE	S	☐ Change ☒ Addition
4.2 NAME	Ms THERESE THERIAULT	
4.3 STREET ADDRESS	2300 GRIFFIN RD LOT 153	
4.4 CITY-ST-ZIP	FORT LAUDERDALE FA 33 312	
5.1 TITLE	D	☐ Change ☐ Addition
5.2 NAME	MR GILLES ROUSSEAU	
5.3 STREET ADDRESS	2300 GRIFFIN RD LOT 117	
5.4 CITY-ST-ZIP	FORT LAUDERDALE FA 33312	
6.1 TITLE	D	☐ Change ☐ Addition
6.2 NAME	MR YVON PROULX	
6.3 STREET ADDRESS	2300 GRIFFIN RD	
6.4 CITY-ST-ZIP	FORT LAUDERDALE FA 33312	

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

DOMINIQUE CORRIVEAU

P

FEB 17, 1996 954 962 4879

DATE

Daytime Phone

CR2E037 (12/95)