

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED

95 APR 28 PM 6:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 747720 (1)**

1. Corporation Name

**BAMBOO MOBILE HOME PARK TENANTS' ASSOCIATION, IN C.**

Principal Place of Business

Mailing Address

2402 CHARLES RD.  
PEMBROKE PARK FL 33009

2402 CHARLES RD.  
PEMBROKE PARK FL 33009

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>06/19/1979</b>	3a. Date of Last Report <b>03/30/1994</b>
4. FEI Number <b>59-1895013</b>	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GILSON, R.J.  
2402 CHARLES RD.  
PEMBROKE PARK, FL  
HALLANDALE FL 33009**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent sign this statement when resigning)

DATE

*R.J. Gilson* 4-22-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>President</b>	1.1 TITLE	<b>PRESIDENT</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PLANT, LOUISE</b>	1.2 NAME	
STREET ADDRESS	<b>2406 CHARLES ROAD</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>HALLANDALE FL</b>	1.4 CITY - ST - ZIP	
TITLE	<b>DIR</b>	2.1 TITLE	<b>DIR</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GIGUERE, CELINE</b>	2.2 NAME	<b>FRAN ROOT</b>
STREET ADDRESS	<b>5118 CAROLINA STREET</b>	2.3 STREET ADDRESS	<b>2314 CHARLES RD.</b>
CITY - ST - ZIP	<b>HALLANDALE FL</b>	2.4 CITY - ST - ZIP	<b>HALLANDALE, FL. 33009</b>
TITLE	<b>D Deceased</b>	3.1 TITLE	<b>DIR</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BYDER, JOHN</b>	3.2 NAME	<b>BARBARA ORR</b>
STREET ADDRESS	<b>2401 SUSAN LANE</b>	3.3 STREET ADDRESS	<b>2401 SUSAN LN.</b>
CITY - ST - ZIP	<b>HALLANDALE FL</b>	3.4 CITY - ST - ZIP	<b>HALLANDALE, FL 33009</b>
TITLE	<b>D</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JAHNKE, DOROTHY</b>	4.2 NAME	
STREET ADDRESS	<b>2406 SUSAN LANE</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>HALLANDALE FL</b>	4.4 CITY - ST - ZIP	
TITLE	<b>ST</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GILSON, R.J.</b>	5.2 NAME	
STREET ADDRESS	<b>% 2402 CHARLES ROAD</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>PEMBROKE PARK, FL 0</b>	5.4 CITY - ST - ZIP	
TITLE	<b>VP x ad</b>	6.1 TITLE	<b>DIR</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>ANNETTE JACOB</b>	6.2 NAME	<b>MURIEL HULL</b>
STREET ADDRESS	<b>2414 CHARLES RD</b>	6.3 STREET ADDRESS	<b>2402 SUSAN LN.</b>
CITY - ST - ZIP	<b>PEMBROKE PARK</b>	6.4 CITY - ST - ZIP	<b>HALLANDALE, FL. 33009</b>

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 110.07(3)(b), 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; that 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, changed, or on an attachment with an address.

SIGNATURE: *R.J. Gilson Sec'y/Treas.* 4-22-95 305 967-8666