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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 748243

(3)

TATIO	VILLAS BLOCK 4 ASSO	CIATION, II	NC.					
Principal Place	e of Business	Mailır	ng Address			I TORRALL FORMAL PROPERTY.	CIODA IIII DIGII DIBE DIDII DI	ill Bligit Bibli 1841
HIALEAH FL 33015 HIAL			9019 WEST LAKE DR HALEAH FL 33015					
03		US				3. Date Incorporated or Qualific		•
A D: : : : : : : : : : : : : : : : : : :	(5)					07/30/1979	04/12/	1995
2. Principal Pi	lace of Business	2a. M	ailing Address			4. FEI Number	<u> </u>	Applied For
Suite, Apt.	#, etc.		uite, Apt. #, etc.			59-1970481	¢0.7	Not Applicable
22		27	and the of etc.			5. Certificate of Status Desired	1 1	5 Additional Required
City & State	e	Ci	ty & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28				Trust Fund Contribution	. +	ed to Fees
Zip	Country	Zi _l	р	Cou	ntry	8. This corporation has liability		s. 199.032,
24	9. Name and Address of Co	29	ed Agent	30		Florida Statutes	Yes X No	
	o, manus and nooress of of		ou nyent		81 Name /	10. Name and Address of Ne	w negistered Agent	
ם)/בטי	DODEOT T				(rayie Garci	<u>a</u>	
	, robert t. Dx chapel dr.				82 Street Add	Iress (P.O. Box Number is Not Accept 19 West Lak	otable)	
	H FL 33015				83	org west car	e. DRIVE	
HINLEAT	1 FL 33015							
					84 City	aleah	FL 85 2	ip Code 3 30/5
11. Pursuant t	to the provisions of Sections 617.	0502 and 617.1	508, Florida Statu	tes, the abo	ve-named corpo	oration submits this statement for the	nurnose of changing its	クラグ/5 registered office
or register	red agent, or both, in the State of	Florida Such	anne was authori	zed by the o	ornoration's hos	ard of directors. I hereby accept the a	appointment as registere	d agent. I am
familiar wi	ith, and accept the philipations of	Section 617.050	73. Florida Statuto	c c c c	orporation 5 boo	are an encoron into object the t		
	ith, and accept the obligations of,	Section 617 050	7	S.	orporation's boo	oration submits this statement for the ard of directors. I hereby accept the a	2/11/0	1.
	Jayl	Section 617,050	arcia	ノ			3/1/9	6
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SIGNATURE	Signature, typed or printed name of registered	agent and title Tappis	arcia	OTE: Registered	Agent signature require	ed when reinstating)	3/1/9 DATE	6
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appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jay Co Jarce a

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/94 (315)839-1996