

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J13197 (5)**

1. Corporation Name
GRI OF SOUTH FLORIDA, INC.

8571
\$200.00
RECORDED MAR 6 9 1996



Principal Place of Business
**951 S ANDREWS AVE
POMPANO BCH FL 33069
US**

Mailing Address
**951 S ANDREWS AVE
POMPANO BCH FL 33069
US**

2. Principal Place of Business

21 State, Apt. #, etc.
22 City & State
23 Zip
24 County

2a. Mailing Address

26 State, Apt. #, etc.
27 City & State
28 Zip
29 County

9. Name and Address of Current Registered Agent

**WRIGHT & FULFORD, P.A.
145 N. MAGNOLIA AVE.
P.O. BOX 2828
ORLANDO FL 32802**

3. Date Incorporated or Qualified **05/07/1986** 3a. Date of Last Report **05/01/1995**
4. FEI Number **65-0002953** 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

10. Name and Address of New Registered Agent

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 607.0502 and 607.1503, 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, Sections 607.0503, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	WALICK, GREGG E.	
STREET ADDRESS	951 S ANDREWS AVE	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	POWELL, STEVEN G.	
STREET ADDRESS	951 S ANDREWS AVE	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BACHELDR, HERBERT R	
STREET ADDRESS	951 S ANDREWS AVE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	VICE PRESIDENT OF FINANCE	<input type="checkbox"/> DELETE
NAME	SHIRLEY D. LITTLE	
STREET ADDRESS	951 S. ANDREWS AVE	
CITY-ST-ZIP	POMPANO BEACH FL 33069	
TITLE	VICE PRESIDENT	<input type="checkbox"/> DELETE
NAME	MICHAEL R. BROWN	
STREET ADDRESS	951 S. ANDREWS AVE	
CITY-ST-ZIP	POMPANO BEACH, FL. 33069	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	SHIRLEY D. LITTLE
43 STREET ADDRESS	951 S. ANDREWS AVE
44 CITY-ST-ZIP	POMPANO BEACH FL 33069
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	MICHAEL R. BROWN
53 STREET ADDRESS	951 S. ANDREWS AVE
54 CITY-ST-ZIP	POMPANO BEACH FL 33069
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment to this address.

SIGNATURE: *Shirley D. Little* VICE PRESIDENT OF FINANCE 3/26/96 954-942-4449
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)