

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 JAN 23 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K38627

(1)

1. Corporation Name

TFB PROPERTIES, INC.

Principal Place of Business

Mailing Address

9100 GRIFFIN ROAD
COOPER CITY FL 33328

9100 GRIFFIN ROAD
COOPER CITY FL 33328

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/13/1988

3a. Date of Last Report
03/30/1994

2. Principal Place of Business

2a. Mailing Address

21 **1489 W. Palmetto Park Rd**

26 **1489 W. Palmetto Park Rd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **300**

27 **300**

City & State

City & State

23 **Boca Raton, FL**

28 **Boca Raton, FL**

Zip

Country

Zip

Country

24 **33486**

25 **Palm Bch**

29 **33486**

30 **Palm Bch**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZEDECK, LEONARD E.
1820 N.E. 163RD ST
N. MIAMI BCH FL 33162**

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 607.1508, 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 of the person named as registered agent and the applicant.

(NOTE: Registered Agent Signature required when filing.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	GRISWOLD, CARL F.
STREET ADDRESS	9100 GRIFFIN ROAD
CITY-ST-ZIP	COOPER CITY FL
TITLE	DST
NAME	ZEDECK, MURRAY
STREET ADDRESS	9100 GRIFFIN ROAD
CITY-ST-ZIP	COOPER CITY FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	GRISWOLD, CARL F.	
1.3 STREET ADDRESS	1489 W. Palmetto Park Rd. #300	
1.4 CITY-ST-ZIP	Boca Raton, FL	
2.1 TITLE	DST	☒ Change ☐ Addition
2.2 NAME	ZEDECK, MURRAY	
2.3 STREET ADDRESS	1489 W. Palmetto Park Rd., #300	
2.4 CITY-ST-ZIP	Boca Raton, FL	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information reported with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 a registered agent or have been authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, in accordance with the instructions.

SIGNATURE:

[Signature]

CARL F. GRISWOLD

1/17/95

407-347-2031

PRINT FULL AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number