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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

L14048

GARDEN CRAFT, INC.

Principal Place of Business Mailing Address

11634 WHITEMARSH DR WEST PALM BEACH FL 33414-5940 11634 WHITEMARSH DR WEST PALM BEACH FL 33414-5940



						3. Date Incorporated or Qualified 09/05/1989	3a. [ate of L 04/25		
2. Principa! Pla	ce of Business	2a. Mailing Address	5			4. FEI Number				upplied For
<u> </u>		26				65-0144046				lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State				Election Campaign Financing Trust Fund Contribution				May Be I to Fees
Zφ	Country 25	Zip 29	Cοι 30	intry		This corporation has liability for if Florida Statutes			der s	199.032,
1	9. Name and Address of Curre			Γ		10. Name and Address of New R	egister	ed Age	nt	
				81	Name					
SPILLANE, J. P. 12788 W. FOREST HILL BLVD. WEST PALM BEACH FL 33414					Street Address (P.O. Box Number is Not Acceptable)					
				84	City	·····		EL 8	5 Zip	Code
11 Pursuant tr	o the provisions of Sections 607.050	32 and 607 1508 Florida !	Statutes the abo)ve r	named cornora	ation submits this statement for the pur			naits re	eaistered offic
familiär witl	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec	rida. Such change was au ction 607.0505, Florida Sta	thorized by the a atutes.	corp	oration's boar	d of directors. I hereby accept the app	ointmen:	t as regi	stereci	agent. I am
signature _{-:}	Skyriature, typed or printed name of regist red age	nt and title if applicable	(NOTE Registered	d Ager	nt signature required	when reinstating!	DAT	€		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS A	AND DIF	RECTO	RS IN 12
ITLE	DP	☐ DELETE	E 1.11	TITLE				C	hange	■ Addition
NAME	BAKER, JEFFREY A.		1.2 N	IAME						
STREET ADDRESS	11634 WHITEMARSH DRIVE	<u>:</u>	1.3 S	TREET	ADDRESS					
CITY - \$1 - ZIF	W. PALM BEACH FL		140	HTY-S	ST - ZIP					
TOTAL TO ASSOCIATION		☐ DELETE		TITLE					hange	☐ Addition
NAME			201	IAME						
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			238	STREET						
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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 or Block 13 or Block 13 or Block 14 or Block 15 or Bl

SIGNATURE

1-20-96 793-8760