

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

APPROVED AND FILED

SUM - 1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT, 1995

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

DOCUMENT # **M72702** (7)
 1. Corporation Name
GRANDVIEW MANOR INC.

Principal Place of Business: 6211 S.W. 45 ST. DAVIE FL 33314
 Mailing Address: 6211 S.W. 45 ST. DAVIE FL 33314

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: 03/14/1988
 3a. Date of Last Report: 05/01/1994
 4. FEI Number: 65-0039178
 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: [X] Yes [] No

9. Name and Address of Current Registered Agent
LATHAM, JEFFREY L.
6211 S.W. 45 ST.
DAVIE FL 33314

10. Name and Address of New Registered Agent
 81 Name: **Griffin, Alfred D. Jr.**
 82 Street Address (P.O. Box Number is Not Acceptable): **6211 SW 45th Street**
 83 []
 84 City: **Davie** FL 85 Zip Code: **33314**

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]* DATE: **5/1/95**

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	LATHAM, JEFFREY L.
STREET ADDRESS	6211 S.W. 45 ST.
CITY - ST - ZIP	DAVIE FL
TITLE	SD
NAME	GRIFFIN, ALFRED D JR.
STREET ADDRESS	6211 SW 45 ST
CITY - ST - ZIP	DAVIE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DP/S/T/	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Griffin, Alfred D Jr	
13 STREET ADDRESS	6211 SW 45th Street	
14 CITY - ST - ZIP	Davie, FL 33314	
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 type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
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 does not qualify for the exemption stated in Section 119.07(2)(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 or the person or persons 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, in an address.

SIGNATURE: *[Signature]* **Alfred D. Griffin Jr** DATE: **4/17/95** **587-900**