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FILED

Jan 21 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02648 (6)

1. Corporation Name

GRIFFWOOD RESIDENTS, INCORPORATED

Principal Place of Business

03896 375 PICCIOLA RD
FRUITLAND PARK FL 34731-3371

Mailing Address

03896 375 PICCIOLA RD
FRUITLAND PARK FL 347313. Date Incorporated or Qualified
04/19/19843a. Date of Last Report
01/24/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

4. FEI Number

59-2961239

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNS, JAMES
03896-375 PICCIOLA ROAD
FRUITLAND PARK FL 34731

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME SIEWERT, BERNARD
STREET ADDRESS 03896-433 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FLTITLE V ☒ DELETE
NAME THOMAS, AGNES
STREET ADDRESS 03896-631 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FLTITLE DS ☒ DELETE
NAME FELDT, LUCILLE
STREET ADDRESS 03896-142 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FLTITLE DT ☐ DELETE
NAME WRIGHT, EILEEN
STREET ADDRESS 03896-641 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FLTITLE V ☐ DELETE
NAME MCMILLEN, HARVEY
STREET ADDRESS 03896-384 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FLTITLE D ☐ DELETE
NAME MEYER, HOLLY
STREET ADDRESS 03896-250 PICCIOLA ROAD
CITY-ST-ZIP FRUITLAND PARK FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE ☒ Change ☐ Addition
2.2 NAME LAYMANNA, JUSTIN
2.3 STREET ADDRESS 03896-432 PICCIOLA RD
2.4 CITY-ST-ZIP FRUITLAND PARK FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME THOMAS, AGNES
3.3 STREET ADDRESS 03896-631 PICCIOLA RD
3.4 CITY-ST-ZIP FRUITLAND PARK FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bernard Siewert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)