

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 14 AM 9:36

DOCUMENT # **N32067 (3)**

1. Corporation Name
134 HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business Mailing Address
4700 SW 134 AVE FT LAUDERDALE FL 33330 US **4700 SW 134 AVE FT LAUDERDALE FL 33330 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/03/1989** 3a. Date of Last Report **03/18/1994**
4. FEI Number **65-0129751** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 **4810 SW 134 AVE** 26 **4810 SW 134 AVE**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22
City & State 27
23 **FORT LAUDERDALE, FL** 28 **FORT LAUDERDALE**
Zip Country Zip Country
24 **33330** 25 **USA** 29 **33330** 30 **USA**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
FRANZELAS, JOHN
4700 SW 134 AVE
FT. LAUDERDALE FL 33330
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
4810 SW 134 AVE
83
84 City State Zip Code
FORT LAUDERDALE FL 33330

11. Pursuant to the provisions of Sections 607.0542 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 *John Franzelas* **JOHN FRANZELAS** DATE **4-10-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLORIAN, BERKELEY	1.2 NAME	
STREET ADDRESS	2275 SW 45TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASSEY, GENERAL	2.2 NAME	
STREET ADDRESS	4710 SW 134 AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	PTD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANZELAS, JOHN	3.2 NAME	FRANZELAS, JOHN
STREET ADDRESS	4700 SW 134 AVENUE	3.3 STREET ADDRESS	4810 SW 134 AVE
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33330
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACKIE, STEPHEN	4.2 NAME	
STREET ADDRESS	4740 SW 134 AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 110.07(3)(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 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 in an attachment with an address.

SIGNATURE: *John Franzelas* **JOHN FRANZELAS** DATE **4-10-95** (305) 474-3378