FILE NOW: FILING FEE IS \$61.25

 NONPROFIT CORPORATION ANNUAL REPORT



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

1996

N93000004347 (1) **DOCUMENT #**

NEW HOPE	CONDOMINITIM	MULTALOUSSA	INC

Principal Place of Business Mailing Address 9921 SW 97 COURT 9921 SW 97 COURT MIAMI FL 33176 MIAMI FL 33176 3. Date Incorporated or Qualified 3a. Date of Last Report 09/28/1993 05/01/1995 2. Principal Place of Business 4. FEI Number -0585680 2a. Mailing Address APPLIED FOR 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be

26 23 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 30 24 25 29 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRIFFEY, RONALD L 82 Street Address (P.O. Box Number is Not Acceptable) 9921 SW 97TH COURT 83 **MIAMI FL 33176**

84 City Zip Code 65 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. Fam familiar with, and accept the obligations of. Section 617.0503, Florida Statutes.

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 DELETE TITLE 1.1 ToTLE Addition ☐ Change GRIFFEY, RONALD L NAME 1.2 NAME 9921 SW 97TH COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33176** CITY-ST-ZIP 1.4 CITY-ST-ZIP STD DELETE Addition Change TITLE 21 TITLE GRIFFEY, MARY T 2 2 NAME NAME 9921 SW 97TH COURT STREET ADDRESS 23 STREFT ADDRESS **MIAMI FL 33176** CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE TITLE 31 TITLE Change Addition KRISTEN, FIORE M NAME 32 NAME 9921 SW 97 CT STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY - ST - ZIP 3 4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change ■ Addition TITLE NAME 5 2 NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TITLE 6 1 TITLE <u>0000018668ව්</u>රී -06/19/96--01041--021 6 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS ***61.25 6.4 CITY - ST - ZIP 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(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 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: Monature AND TYPES

RONALD L. GRIPPEY

4-28-96 305-271-6343

(12/95) CR2E037

Applied For

Fee Required

Not Applicable