

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000064615 (4)

1. Corporation Name

BARTOW PROPERTY MANAGEMENT, INC.



Principal Place of Business

10636 MAPLE CHASE CIRCLE
BOCA RATON FL 33498

Mailing Address

10636 MAPLE CHASE CIRCLE
BOCA RATON FL 33498

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State

23 Zip Country
24 25

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28 Zip Country
29 30

9. Name and Address of Current Registered Agent

GUTENSTEIN, GARY
10636 MAPLE CHASE CIRCLE
BOCA RATON FL 33498

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 607.0002 and 607.1500, 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 607.0004, Florida Statutes.

SIGNATURE

Signature of person authorized to change the registered office or registered agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	GUTENSTEIN, GARY	
STREET ADDRESS	10636 MAPLE CHASE CIRCLE	
CITY-STATE-ZIP	BOCA RATON FL 33498	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	☐ Change ☒ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

V.P.
Adrienne Morbue Gutenstein
10636 Maple Chase Dr
Boca Raton, FL 33498

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-03/28/96--01081--027
***200.00

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or significant 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 registered or transfer corporation to which this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, as an attached with an address.

SIGNATURE:

Gary Gutenstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/96

407-32-9565

CR2E034 (12/95)

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