FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600061428 (4)

STRATFORD VILLAGE APARTMENTS, INC.

Principal Place of Business

Mailing Address

FILED May 07 1997 8:00am Secretary of State



25350 U.S. HIGHWAY 19 NORTH CLEARWATER FL 34823			25350 U.S. HIGHWAY 19 NORTH CLEARWATER FL 34623-2146					
					3. Date Incorporated or Qualified 07/19/1996	3a. Date of Las	st Report	7
	lace of Business	2a. Mailing Addres	2a. Mailing Address		4. FEI Number		Applied For	1
21		26	26		65_0600007		Not Applicable	1
Suite, Apt.		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	0	City & State	h		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country Zip 25 29 30		 -7	Country 8. This corporation has liability for intangible tax under Florida Statutes X Yes ☐ No		er s. 199.032,		
	g, Name and Address	s of Current Registered Agent		10. Name and Address of New Registered Agent				
BIRN	NBAUM, MARC			81 Name				1
	01 BISCAYNE BOULEV TE 400	'ARD	82 Street Add		Address (P.O. Box Number is Not Acceptab	ole)		1
	MI FL 33180			83		·		1
				84 City		85 Z	ip Code	1
44 Duraciant	to the provisions of Contin	CO7.01.00 and CO7.41.00 Findida	Oi-1 II	<u></u>		- I-L.	•	
oπice or r	egistered agent, or both, i	in the State of Florida. Such change	was authorized	d by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	surpose of changin of the appointment	g its registered as registered	
	rn familiar with, and accep	of the obligations of, Section 607.05	05, Florida Stat	utes.				
SIGNATURE	Staneture, typed or printed name of	f registered agont and title if epipheable	(NOTE: Boustern	1 Agest signature	required when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS			arige a dig latero	ADDITIONS/CHANGES TO OFFIC		OBS IN 12	10
TITLE	D	DELET	13. IE 1.1 II	IL F	7.0011313171111320 10 01110	Chang		18
NAME	HERZBERG, SAM		12 N/	\ME				7
STREET ADDRESS	25350 U.S. HIGHWA	Y 19 NORTH	1351	HEET ADDRESS				5
CITY-ST-ZIP	CLEARWATER FL 34	623	14 CI	TY-ST-ZIP				Š
TITLE	D DELETE 211		ILE		Chang	ge Addition	ן כ	
NAME	BURSTYN, JEREMIAH		2 2 N/	\ME				
STREET ADDRESS	4014 CHASE AVENU		2 3 51	REE1 ADDRESS				
CITY-ST-ŽIP	MIAMI BEACH FL 33			ITY-ST-ZIP				J
TITLE	DELETE			rt F		☐ Chang	e [] Addilion]
NAME	GALBUT, RUSSELL			IME				
STREET ADDRESS	4014 CHASE AVENU		3351	REE1 ADDRESS				
CITY+ST-ZIP	MIAMI BEACH FL 33			11Y - S1 - ZIP				1
TITLE		L] DECEN				∐ Chang	e [_] Addition	ì
NAME			4. 2 N					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP TITLE		DELET		TY - ST - ZIP		Chane	. Takaisia	┨
		ניין טוננו				L Chang	e L Addition	
NAME Street address			5.2 NA					
CITY-ST-ZIP				RECT ADDRESS				
TITLE		☐ DELET		TY-ST-ZIP		Chang	e	1
NAME		_ bree	6.2 NA			[_] Gliang	™ CT MODURA	
STREET ADDRESS				REET ADDRESS				
City-ST-ZIP								1
AIII-OI-SIE			0.4 CI	TY-ST-ZIP				1

. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching the hand address.