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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000084620 (8) DOCUMENT #

GARDEN CITY APARTMENTS, INC.

FILED Jan 23 1998 8:00am Secretary of State



Dringing Blood	of Business	Mailing Ac	Idrana				
Principal Place of Business Mailing Address				45 BI LIB			
			2000 S.E. PORT ST. LUCIE BLVD. PORT ST. LUCIE FL 34952				
FORT ST. LUCKE PL 34802		rom or.	FORT ST. LUGIE FL 34392				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 10/01/1997
2. Principal Pi	ace of Business	2a. Mailing	Address				4. FEA Number Applied For
21		26	26				65-0783991 Not Applicable
Sulte, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				SR.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & State	•	City &	City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country	Zip		L Co	untry		8. This corporation owes or has paid the current year Intangible
24	25	29		30	· · · · ·		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered A	gent		81		10. Name and Address of New Registered Agent
BELLANTONI, CARMEN 2000 S.E. PORT ST. LUCIE BLVD.					81	Name	
			82	Street Address (P.O. Box Number is Not Acceptable)			
PO	RT ST. LUCIE FL 34952						
					83		
					84	City	■■ 85 Zip Code
						,	FL S Elp code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508,	Florida Stalute	os, the a	above	e-named	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I ar	n familiar with, and accept the obli	igations of, Section	1 607.05 05 , Flo	rida Sta	atutes	ine corp i.	oration's board of directors. Thereby accept the appointment as registered
SIGNATURE							
	Signature, typed or printed name of registered a		n (NO1)		ngA be	nt signature r	equired when reinstating) DATE
12.		ND DIRECTORS	DELETE	13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELLATONI CADUEN		L DELETE	1.11		İ	L_J Change L_J Addition
NAMÉ	BELLATONI, CARMEN	DIVO			IAME		
STREET ADDRESS	2000 S.E. PORT ST. LUCIE	DLYU.				ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952		D perese		CΠY-S	T-ZIP	[Ob. 10]
TITLE	D OUTSIEV MADY O		DELETE	2.1 1		1	Change Addition
NAME	CHEELEY, MARK O	DIVID		4	IAME	-	
STREET ADDRESS	2000 S.E. PORT ST. LUCIE	DLVD.		235	STAEET	ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34952			_	CITY-S	T-ZIP	
TITLE			DELETE	3.1 7			Change Addition
NAME					AME		
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			DC: FFF		CITY - S	T-ZIP	
TITLE			DELETE	4.1 T			Change Addition
NAME				4. 2	NAME		
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP	<u></u>				:ITY - \$1	r-ZIP	
TITLE			☐ DELETE	5.1 3	ITLE	Ì	L_J Change L_J Addition
NAME				5.2 1	IAME	Į	
STREET ADDRESS				5.3 \$	TREE 1	ADORESS	
CITY-ST-ZIP					ITY-SI	r-ZIP	
TITLE			DELETE	6.11	ITLE		Change Addition
NAME				6.2 N	IAME		
STREET ADDRESS				6.3 S	TREET	ADDRESS	
CITY-ST-ZIP					ITY-SI		
14 I hereby c	artify that the information sumplied	with this ling doe	e not outslify fo	r the ev	amnt	on stated	Lin Section 119 07(3)(i) Figrida Statutes further certify that the information

the cross not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the same legal effect as if made under oath; that I am an expected to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in fifth an address. Indicated on this annual roport or supplemental-indicated on this annual roport or supplemental-officer or director of the corporation or the received Block 12 or Block 13 if changed, or on an allachy