## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 20, 2006 8:00 am Secretary of State **DOCUMENT #716445** 04-20-2006 90214 034 \*\*\*\*61.25 MOUNT OLIVE GARDENS NO.1, INC. Principal Place of Business Mailing Address OUGTITIO 4360 W. OAKLAND PK. 1701 NW 6TH COURT, #I-101 LAUDERDALE LAKES, FL 33313 FORT LAUDERDALE, FL 33311 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-1403029 City & State City & State Applied For Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHANGE, AVOLENE 7482 NW 48TH PL LAUDERHILL, FL 33319 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. D TITLE Change Addition TITLE ☐ Delete NAME ROUHLAC, JULIET NAME STREET ADDRESS 9250 W FLAGLER STREET ROOM 6500 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 33102 PD ☐ Change ☐ Addition TITLE ☐ Delete TELLE CHANGE, AVOLENE NAME NAME 7482 NW 48TH PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL 33319 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME DOROTHEA P PAYTON NAME STREET ADDRESS 443 NE 210 CIR TERR 102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL ☐ Change ☐ Addition TITLE ☐ Defete TITLE DIXION, CASTELLA NAME NAME STREET ADDRESS STREET ADDRESS 750 NW 38TH AVENUE FT. LAUDERDALE, FL 33311 CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition ☐ Delete TITLE MANN, LOUISE NAME NAME 3610 NW 9TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL 33311 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE

FILED

CITY-ST-7IP

NAME STREET ADDRESS

HOUSTON, JAMES

1715 NW 162ND AVE. PEMBROKE PINES, FL 33028

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

<sup>12.</sup> I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.