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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 748907 (3)

1. Corporation Name
ACACIA GARDENS, INC.



2. Principal Place of Business
182 PINWOOD COURT
JUPITER, FL 33458
US

Mailing Address
182 PINWOOD COURT
JUPITER, FL 33458
US

3. Date Incorporated or Qualified
09/13/1979

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

2. Principal Place of Business
21 140 TIMBERLINE DRIVE
Suite, Apt. #, etc.
22
City & State
23 Jupiter, FL
Zip Country
24 33458 25 USA

2a. Mailing Address
26 140 TIMBERLINE DRIVE
Suite, Apt. #, etc.
27
City & State
28 Jupiter, FL
Zip Country
29 33458 30 USA

5. Certificate of Status Desired XX \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
GANNIS, DAVID
182 PINWOOD COURT
JUPITER, FL 33458

10. Name and Address of New Registered Agent
81 Name DAVID GANNIS
82 Street Address (P.O. Box Number is Not Acceptable) 140 TIMBERLINE DRIVE
83
84 City Jupiter FL 85 Zip Code 33458

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 agent 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 617.0503, Florida Statutes.

SIGNATURE David Gannis, President David L. Gannis 4-30-99
Signature typed or printed name of registered agent and the filer (addressee) NOTE: Registered Agent signature required when reinstating DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE	PD/TD	<input checked="" type="checkbox"/> DELETE
12.2 NAME	GANNIS, DAVID	
12.3 STREET ADDRESS	182 PINWOOD COURT	
12.4 CITY-STATE-ZIP	JUPITER, FL 33458	
12.1 TITLE	VD/SD	<input checked="" type="checkbox"/> DELETE
12.2 NAME	VINHO, IDELLA	
12.3 STREET ADDRESS	1752 ARDLEY PLACE	
12.4 CITY-STATE-ZIP	NORTH PALM BEACH, FL 33458	
12.1 TITLE	D	<input checked="" type="checkbox"/> DELETE
12.2 NAME	CONLAN, ALAN	
12.3 STREET ADDRESS	3816 92 ND LANE NORTH	
12.4 CITY-STATE-ZIP	LAKE PARK, FL 33404	
12.1 TITLE		<input type="checkbox"/> DELETE
12.2 NAME		
12.3 STREET ADDRESS		
12.4 CITY-STATE-ZIP		
12.1 TITLE		<input type="checkbox"/> DELETE
12.2 NAME		
12.3 STREET ADDRESS		
12.4 CITY-STATE-ZIP		

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

13.1 TITLE	PD/TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	Gannis, David	
13.3 STREET ADDRESS	140 TIMBERLINE DRIVE	
13.4 CITY-STATE-ZIP	Jupiter, FL 33458	
13.1 TITLE	VD/SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	Idella Vinho	
13.3 STREET ADDRESS	1752 Ardley Place	
13.4 CITY-STATE-ZIP	North Palm Beach, FL 33408	
13.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	Alan Conlan	
13.3 STREET ADDRESS	3816 92nd Lane North	
13.4 CITY-STATE-ZIP	Lake Park, FL 33403	
13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY-STATE-ZIP		
13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0503(1)(b) Florida Statutes. I further certify that the information provided 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. I am a member 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 on Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: David L. Gannis DAVID GANNIS 4-30-99 561-575-7136
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number