


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90258 048 ****61.25

DOCUMENT # 758134
1. Entity Name
TAMARAC GARDENS PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business: C/O CASTLE GROUP, P.O BOX 189013, PLANTATION FL 33318 US
Mailing Address: C/O CASTLE GROUP, P.O BOX 189013, PLANTATION FL 33318 US

24058403



MOORE CR2E037 (11/03)

2. Principal Place of Business: 9835 N.W. 68th Pl
3. Mailing Address: Suite, Apt. #, etc.

City & State: Tamarac, FL

4. FEI Number: 59-2147822
Applied For: Not Applicable

Zip: 33321

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

6. Name and Address of Current Registered Agent
CASTLE MANAGEMENT, INC
4450 W SUNRISE BLVD
C-100
PLANTATION FL 33313

7. Name and Address of New Registered Agent
The Law Offices of Katzman & Korr, P.A.
1501 Northwest 49th Street, Suite 202
Fort Lauderdale, Florida 33309
FL Zip Code

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: *Terren L Korr, Esq.* DATE: 04/26/04
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE: SD NAME: KUSHNER, PENNY STREET ADDRESS: 9920 NW 68 PL 103 CITY-ST-ZIP: TAMARAC FL 33321	<input type="checkbox"/> Delete
TITLE: <i>D</i> NAME: SHUSTER, PAUL STREET ADDRESS: 9740 W MCNAB RD #111 CITY-ST-ZIP: TAMARAC FL	<input checked="" type="checkbox"/> Delete
TITLE: PD NAME: COSTA, JAMES STREET ADDRESS: 9549 W. MCNAB RD CITY-ST-ZIP: TAMARAC FL	<input type="checkbox"/> Delete
TITLE: TD NAME: GINSBERG, JERRY STREET ADDRESS: 9850 W MCNAB RD #213 CITY-ST-ZIP: TAMARAC FL	<input type="checkbox"/> Delete
TITLE: D NAME: SCHECTER, ISABELLE STREET ADDRESS: 9925 NW 68 PL 102 CITY-ST-ZIP: TAMARAC FL 33321	<input type="checkbox"/> Delete
TITLE: D NAME: LAMAMA, ELIZABETH STREET ADDRESS: 9692 W MCNAB RD CITY-ST-ZIP: TAMARAC FL	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: VD NAME: Saffles, Glenn STREET ADDRESS: 9475 W. McNab Rd. CITY-ST-ZIP: Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: Bologno, Lou STREET ADDRESS: 9606 West McNab Rd. CITY-ST-ZIP: Tamarac, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: Small, Dorothy STREET ADDRESS: 9455 W. McNab Rd. CITY-ST-ZIP: Tamarac, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: LaVorgna, Robert STREET ADDRESS: 9523 W. McNab Rd. CITY-ST-ZIP: Tamarac, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: Gosselin, Roger STREET ADDRESS: 9741 W. McNab Rd. CITY-ST-ZIP: Tamarac, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: PAUL SHUSTER STREET ADDRESS: 9740 W MCNAB RD CITY-ST-ZIP: Tamarac, FL 33321	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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.

SIGNATURE: *James F Costa* **JAMES F. COSTA** DATE: 4-14-04 DAYTIME PHONE #