

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763976

FILED
Apr 09, 2008
Secretary of State

Entity Name: GARDEN LAKE TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1101 SW 122 AVENUE
#417 OFFICE
MIAMI, FL 33184 US

New Principal Place of Business:

Current Mailing Address:

1101 SW 122 AVENUE
#417 CONDO OFFICE
MIAMI, FL 33184 US

New Mailing Address:

FEI Number: 59-2335769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STACY, SAND CPA
5775 COLLINS AVE
709
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEDESMA, TANIA
Address: 1101 SW 122 AVE, #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: VP () Delete
Name: CAMPBELL, ARLENE
Address: 1101 SW 122 AVE, #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: TR () Delete
Name: ALFARO, MERCEDES
Address: 1101 SW 122 AVE., #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: SCTY (X) Delete
Name: BENITEZ, MARTHA
Address: 1101 SW 122 AVE., #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: DIR (X) Delete
Name: RODRIGUEZ, EDUARDO
Address: 1101 SW 122 AVE., #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAMPBELL, ARLENE
Address: 1101 SW 122 AVE, #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: VP (X) Change () Addition
Name: SILVA, LUZ
Address: 1101 SW 122 AVE, #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: TR (X) Change () Addition
Name: BARBE-VILLA, ADRIANA
Address: 1101 SW 122 AVE., #417 CONDO OFFICE
City-St-Zip: MIAMI, FL 33184 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE CAMPBELL

P

04/09/2008

Electronic Signature of Signing Officer or Director

Date