2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007
Secretary of State

DOCUMENT# N03000011006

Entity Name: MAPLE GARDENS THREE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 20-1292107 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W
C/O SENTRY MANAGEMENT INC.
2180 W SR 434 STE 5000
LONGWOOD, FL 327795044 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: D ( ) Delete
Name: STEMPNOWSKI, JANUSZ
Address: 10105 HATTERAS COURT
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete
Name: CHIM, HOP
Address: 2130 HUNTINGTON DRIVE UNIT 307
City-St-Zip: PASADENA, CA 91030

Title: D ( ) Delete
Name: STEMPNOWSKI, ALINA
Address: 10105 HATTERAS COURT
City-St-Zip: FORT MYERS, FL 33919

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SANDERS, NANCY
Address: 12515 MCGREGOR BLVD #211A
City-St-Zip: FORT MYERS, FL 33919

Title: VPSD (X) Change ( ) Addition
Name: HELLER, VIVIAN
Address: 12515 MCGREGOR BLVD #105A
City-St-Zip: FORT MYERS, FL 33919

Title: TD (X) Change ( ) Addition
Name: TAYLOR, JOSEPH
Address: 12515 MCGREGOR BLVD #203A
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Change (X) Addition
Name: JOHNSTON, BERNARD
Address: 910 RUTH DR
City-St-Zip: ELGIN, IL 60123

Title: D ( ) Change (X) Addition
Name: AMORE, CONNIE
Address: 159 SUFFOLK AVE
City-St-Zip: REVERE, MA 02151

I hereby certify that the information supplied with this filing does not qualify for the 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: MARCY SANDERS PD 03/29/2007

Electronic Signature of Signing Officer or Director — Date