## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

with an address, with all other like empowered

changed, or on an attachme

SIGNATURE:

## Apr 07, 2005 8:00 am Secretary of State DOCUMENT # N11035 04-07-2005 90023 046 \*\*\*\*61.25 GARDEN LAKES VILLAGE 3 ASSOCIATION, INC. Principal Place of Business Mailing Address C/O MA-CON, INC 2198 PRINCETON ST #20 SARASOTA FL 34237 C/O MA-CON, INC 2198 PRINCETON ST #20 SARASOTA FL 34237 2. Principal Place of Business 3. Mailing Address Suite Apt. # etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 59-2770989 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEIL, WARREN MA-CON INC Street Address (P.O. Box Number is Not Acceptable) 2198 PRINCETON ST #20 SARASOTA FL 34237 Zip Code FI 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10 ☐ Addition TITLE ☐ Delete TITLE FARR, MARY LEE NAME 3611 GARDEN LAKES IVY STREET ADDRESS STREET ADDRESS BRADENTON FL 34203 CITY-ST-ZIP CITY-ST-7IP VD ☐ Change Addition THLE X Delete TITLE LOWRY, WILLIAM NAME DIMON, ANNETTE 5719 GARDEN LAKES MAJESTIC STREET ADDRESS STREET ADDRESS 5707 Garden Lakes Fern **BRADENTON FL 34203** CITY-ST-ZIP CITY-ST-ZIP Bradenton, Fl 34203 Addition TD . .... TITLE-Delete TITLE Change MENZ, GILBERT NAME NAME JONES, MAHLON 36068 GARDEN LAKES IVY STREET ADDRESS STREET ADDRESS 3609 Garden Lakes Ivy CITY-ST-ZIP BRADENTON FL 34203 CITY-ST-ZIP Bradenton, Fl 34203 Change ★ Addition X Delete JURCY, EDWARD NAME NAME OTIS, RAMONA 5720 Garden Lakes Fern 5715 GARDEN LAKES MAJESTIC STREET ADDRESS STREET ADDRESS BRADENTON FL 34203 CITY-ST-7IP CITY-ST-7IP Bradenton, Fl 34203 Detete T Change ★ Addition TITLE TITLE HAUSER, ROBERT MARTIN, CHARLES NAME NAME 5708 GARDEN LAKES FERN 5705 Garden Lakes Fern STREET ADDRESS STREET ADDRESS BRADENTON FL 34203 CITY-ST-ZIP Bradenton, Fl CITY-ST-ZIP Delete TITLE ☐ Change X Addition TITLE NOCCO, JOSEPH NAME NAME 5721 Garden Lakes Fern STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Bradenton, Fl 34203 CITY-ST-7IP 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

harles Martin 4/4/05

**FILED** 

2005 NOT-EOR-DROEIT CORPORATION

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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DOCUMENT # N1 1035							
GARDEN LAKES VILLAGE 3 ASSOCIATION, INC.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Principal Place of Business		Mailing Address				000	
C/O MA-CON, INC 2198 PRINCETON ST #20 SARASOTA FL 34237		C/O MA-CON, INC 2198 PRINCETON ST #20 SARASOTA FL 34237			40049	1208	
2. Principal Place of Business		3. Mailing Address				· · · · · · · · · · · · · · · · · · ·	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E037 (10/04)		
City & State		City & State			4. FEI Number 59-2770989	<u> </u>	pplied For ot Applicable
Zip Country		Zip	Zip Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required		
Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent.			
WEIL, WARREN				Street Address (P.O. Box Number is Not Acceptable)			
MA-	-CON INC 8 PRINCETON ST #20		. Street At	Street Address (1.0. box Number is Not Acceptable)			
	RASOTA FL 34237		City			Zip Cod	
			City		······································	<u> </u>	
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 (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW: FEE IS \$61.25  9. Election Campaign Financing \$5.00 May Be Due By May 1, 2005  9. Election Campaign Financing Added to Fees Florida Department of State							
10.	OFFICERS AND DIR		11.		DDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN	
TITLE NAME	FARR, MARY LEE	☐ Delete	TITLE NAME	D THER	RIAULT, LEONARD	□ Change	
STREET ADDRESS CITY-ST-ZIP	3611 GARDEN LAKES IVY BRADENTON FL 34203		STREET ADDRESS CITY-ST-ZIP		Garden Lakes Fern		,
TITLE	VD	Delete	TITLE	Brac	denton, Fl 34203	☐ Change	Addition
NAME *	LOWRY, WILLIAM 5719 GARDEN LAKES MAJESTIC		NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	BRADENTON FL 34203		CITY-ST-ZIP				
TITLE	TD MENZ CH BERT	☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS	MENZ, GILBERT 36068 GARDEN LAKES IVY		NAME STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34203		CITY-ST-ZIP				
TITLE NAME	D JURCY, EDWARD	☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADDRESS	5715 GARDEN LAKES MAJESTIC		STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34203		CITY-ST-ZIP				
TITLE NAME	HAUSER, ROBERT	☐ Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	5708 GARDEN LAKES FERN BRADENTON FL 34203		STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ De ete	TITLE			☐ Change	☐ Addition
NAME STREET ADDRESS	* * * * * * * * * * * * * * * * * * * *		NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP		*		
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.							

Daytime Phone #

Date