

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46241

FILED
May 19, 2009
Secretary of State

Entity Name: GARDEN CITY RESORT HOMEOWNERS ASSOCIATION PHASE I, INC.

Current Principal Place of Business:

7310 CHERRY LAKE ROAD
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 74
GROVELAND, FL 34736 US

New Mailing Address:

FEI Number: 59-3107803 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

EL DIFRAWI, AHMED
ECAD FLORIDA CORPORATION
7310 CHERRY LAKE RD
GROVELAND, FL 34736 US

Name and Address of New Registered Agent:

EL DIFRAWI, AHMED
7310 CHERRY LAKE ROAD
GROVELAND, FL 34736 US

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: AHMED ELDIFRAWI

05/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANSOUR, HATEM
Address: 16802 ROYAL PALM DR
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: KASHMIRI, RAFIAH
Address: 16650 ROYAL PALM DRIVE
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: MCNEILL, BRIAN
Address: P.O. BOX 2235
City-St-Zip: MINNEOLA, FL 34755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RAFIAH KASHMIRI

D

05/19/2009

Electronic Signature of Signing Officer or Director

Date