DOCUMENT# 709504 Entity Name: COLONIAL GARDENS APARTMENTS, INC., A CONDOMINIUM			INIUM	Apr 02, 2024 Secretary of State 4767647565CC	
801 PINE DRIV	ncipal Place of Business: E ACH, FL 33060			470704750500	
Current Mai	ling Address:				
801 PINE DI POMPANO I	RIVE BEACH, FL 33060				
FEI Number: 59-1160465 Certificate of			Status Desired: No		
Name and A	Address of Current Registered Agent:				
STARK, GEOR 801 PINE DRIV					
#7	ACH, FL 33060 US				
#7 POMPANO BE/		egistered office or regis	tered agent, or both, i	n the State of Florida.	
#7 POMPANO BE/ The above named	ACH, FL 33060 US	egistered office or regis	tered agent, or both, i	n the State of Florida. 04/02/2024	
#7 POMPANO BE/ The above named	ACH, FL 33060 US d entity submits this statement for the purpose of changing its r	egistered office or regis	tered agent, or both, i		
#7 POMPANO BEA The above named SIGNATURE	ACH, FL 33060 US d entity submits this statement for the purpose of changing its r E: <u>GEORGIE STARK</u> Electronic Signature of Registered Agent	egistered office or regis	tered agent, or both, i	04/02/2024	
#7 POMPANO BE/ The above named	ACH, FL 33060 US d entity submits this statement for the purpose of changing its r E: <u>GEORGIE STARK</u> Electronic Signature of Registered Agent	egistered office or regis	tered agent, or both, i	04/02/2024	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire	ACH, FL 33060 US d entity submits this statement for the purpose of changing its r E: <u>GEORGIE STARK</u> Electronic Signature of Registered Agent <b>ctor Detail :</b>			04/02/2024 Date	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire Title	ACH, FL 33060 US d entity submits this statement for the purpose of changing its r E: <u>GEORGIE STARK</u> Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	SECRETARY	04/02/2024 Date	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire Title Name	ACH, FL 33060 US d entity submits this statement for the purpose of changing its re- E GEORGIE STARK Electronic Signature of Registered Agent Ctor Detail : PRESIDENT MARTOCCI, DANIEL 801 PINE DRIVE #9	Title Name	SECRETARY LEQUERICA, GA 801 PINE DRIVE UNIT 14	04/02/2024 Date BRIELA	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire Title Name Address	ACH, FL 33060 US d entity submits this statement for the purpose of changing its re- E GEORGIE STARK Electronic Signature of Registered Agent Ctor Detail : PRESIDENT MARTOCCI, DANIEL 801 PINE DRIVE #9	Title Name Address	SECRETARY LEQUERICA, GA 801 PINE DRIVE UNIT 14	04/02/2024 Date BRIELA	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip:	ACH, FL 33060 US d entity submits this statement for the purpose of changing its re E GEORGIE STARK Electronic Signature of Registered Agent Ctor Detail : PRESIDENT MARTOCCI, DANIEL 801 PINE DRIVE #9 POMPANO BEACH FL 33060	Title Name Address	SECRETARY LEQUERICA, GA 801 PINE DRIVE UNIT 14	04/02/2024 Date BRIELA	
#7 POMPANO BEA The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	ACH, FL 33060 US d entity submits this statement for the purpose of changing its rest E GEORGIE STARK Electronic Signature of Registered Agent Ctor Detail : PRESIDENT MARTOCCI, DANIEL 801 PINE DRIVE #9 POMPANO BEACH FL 33060 VICE PRESIDENT	Title Name Address	SECRETARY LEQUERICA, GA 801 PINE DRIVE UNIT 14	04/02/2024 Date BRIELA	

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

I hereby 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 all other like empowered.

SIGNATURE: DANIEL MARTOCCI

Electronic Signature of Signing Officer/Director Detail

04/02/2024 Date

**FILED**