

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715370

Entity Name: GARDEN-AIRE VILLAGE SOUTH, INC.**Current Principal Place of Business:**2350 NE 14TH STREET CSWY
POMPANO BEACH, FL 33062**Current Mailing Address:**C/O TMG MANAGEMENT
PO BOX 802
POMPANO BEACH, FL 33061 US**FEI Number:** 59-1260773**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCINTYRE, JAMES
2350 NE 14TH STREET CSWY
POMPANO BEACH, FL 33062 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:** JAMES MCINTYRE

04/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	MCINTYRE, JAMES
Address	C/O TMG MANAGEMENT 631 E. ATLANTIC BLVD.
City-State-Zip:	POMPANO BEACH FL 33060

Title	VP
Name	VERSTRAETEN, JON
Address	C/O TMG MANAGEMENT 631 E. ATLANTIC BLVD.
City-State-Zip:	POMPANO BEACH FL 33060

Title	TREASURER
Name	LEWIS, TAD
Address	C/O TMG MANAGEMENT 631 E. ATLANTIC BLVD.
City-State-Zip:	POMPANO BEACH FL 33060

Title	SECRETARY
Name	BARRETT, JOSEPHINE
Address	C/O TMG MANAGEMENT 631 E. ATLANTIC BLVD.
City-State-Zip:	POMPANO BEACH FL 33060

Title	DIRECTOR
Name	SILVA, CARLOS
Address	C/O TMG MANAGEMENT 631 E. ATLANTIC BLVD.
City-State-Zip:	POMPANO BEACH FL 33060

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: MCINTYRE JAMES

PRESIDENT

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date