

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 220524

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: COUNTRY GARDEN APTS., INC

## Current Principal Place of Business:

1001-1051 ATLANTIC SHORE  
OFFICE  
HALLANDALE, FL 33009

## New Principal Place of Business:

## Current Mailing Address:

1001-1051 ATLANTIC SHORE  
OFFICE  
HALLANDALE, FL 33009

## New Mailing Address:

FEI Number: 59-0867441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PICARD, LYNE  
1001-1051 ATLANTIC SHORES BLVD.  
HALLANDALE, FL 33009 US

## Name and Address of New Registered Agent:

LOMBARDO, JAMES P PRESIDE  
1001-1051 ATLANTIC SHORES BLVD.  
231  
HALLANDALE, FL 33009 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 LOMBARDO

02/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WHITAKER, SHELIA  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

Title: S ( ) Delete  
Name: POORST, ROBERT  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

Title: V ( ) Delete  
Name: MORROW, LAWRENCE  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete  
Name: ST. PIERRE, HENRIETTE  
Address: 1001 ATLANTIC SHORE BLVD  
City-St-Zip: HALLANDALE, FL 33009

Title: T ( ) Delete  
Name: PICARD, LYNE  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete  
Name: HANLON, PAUL  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

## 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:

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

Title: P (X) Change ( ) Addition  
Name: LOMBARDO, JAMES P PRES  
Address: 1001 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES LOMBARDO

P

02/25/2009

Electronic Signature of Signing Officer or Director

Date