2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709317

FILED Mar 16, 2009 Secretary of State

Entity Name: TOWN HOUSE GARDENS, INC., A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business:

9455 BAY HARBOR TERRACE BAY HARBOR ISLAND, FL 33154

OFFICERS AND DIRECTORS:

Current Mailing Address: New Mailing Address:

P O BOX 653637 MIAMI, FL 33265

FEI Number: 59-1871372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, RUSIN UNITE PROPERTY MANAGEMENT

9455 BAY HARBOR TERRACE 11773 SW 34 ST MIAMI, FL 33175 US

BAY HARBOR ISLAND, FL 33154 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: UP 03/16/2009 Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

RUSIN, THOMAS HAYDEMANN, RICHARD Name: Name: 9455 BAY HARBOR TERR., #8N Address: PO BOX 653637 Address: City-St-Zip: BAY HARBOR ISLAND, FL 33154 City-St-Zip: MIAMI, FL 33265

Title: () Delete Title: (X) Change () Addition

ANGEL, RAUL Name: DE SILVA, CELIA Name: Address: 9455 BAY HARBOR TERR., #8S Address: PO BOX 653637 City-St-Zip: BAY HARBOR ISLAND, FL 33154 City-St-Zip: MIAMI, FL 33265

Title: VΡ () Delete Title: (X) Change () Addition

BONANI, ROBERT BONANI, ROBERT Name: Name: 9455 BAY HARBOR TERR., #5N PO BOX 653637 Address: Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: MIAMI, FL 33265

Title: Title: (X) Change () Addition () Delete

Name: MCGEE, MARY Name: ANGEL, RAUL 9455 BAY HARBOR TERR #7N PO BOX 653637 Address: Address: City-St-Zip: BAY HARBOUR ISLAND, FL 33154 City-St-Zip: MIAMI, FL 33265

Title: () Delete Title: () Change (X) Addition

MC GEE, MARY Name: Name: PO BOX 653637 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33265

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: RICHARD PD 03/16/2009