FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

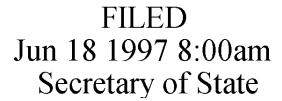
Secretary of State **DIVISION OF CORPORATIONS**

(4)

FIRST GULFSTREAM GARDEN APARTMENTS CONDOMINIUM, INC.

Principal Place of Business

Mailing Address





215 SOUTHEAST THIRD AVENUE HALLANDALE FL 33009				215 SOUTHEAST THIRD AVENUE HALLANDALE FL 33009-5670									
	·							ļ	3. Date Incorporated or Qualified 01/26/1968	3a. D	ate of Last R 01/29/19		
L	Place of Business	2a	2a. Mailing Address					4. FEI Number		Ap	plied For		
21		26						59-1237172		No.	t Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75		
22 City & State				City & State							Fee Re	1	
23				8				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Zip Country			Zip Country				This corporation has liability for intangible tax under s. 199.032,					
24	25 29					30			Florida Statutes Yes No				
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent						
						81	Name	ROB	ERT LEE	PRES	IDENT		
	ntino, fred						Iress (P.O. Box Number is Not Acceptable)						
215 SE 3RD AVENUE 502-A							215 S.E. 3rd Avenue Ant 103-C						
HALLANDALE FL 33009						83 :			•		-		
					ŀ	84	City				85 Zip (Çode	
A B									LANDALE,	FL			
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, office or registered agent, or both, In the State of Florida, Such change was auth 							named he corp	corpori	ation submits this statement for the n's board of directors. I hereby acce	purpose o pt the app	it changing it pointment as	s registered registered	
	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am families with, and accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE	Signature, typed or po	rinled partie of registered age	nl and title	a if applicable (NO)	IF: Registered	LAgent :	signature	required s	when reinstating)	DATE			
12.		OFFICERS ANI			13.		- y /2	- Toquilou	ADDITIONS/CHANGES TO OFFI		D DIRECTOR	S IN 12	
TITLE	PD			DELETE	1.1 717	LE		VICE	ERT BOUDREAU		Change	Addition	
NAME	SORRENTIN	NO, FRED			1.2 NA	ME		ROBE	ERT BOUDREAU				
STREET ADDRESS					1.3 STREET ADDRESS 21.5		215	S.E. 3rd Avenue PH	501 - I	3			
CITY-ST-ZIP		LE, FL 00000				Y-ST-	ZIP	HALL	ANDALE, FL 33009				
TITLE	D	41450 111		DELETE	TITLE			•		☐ Change	Addition		
NAME	ROGERS, J		2.2 NAME							į			
STREET ADDRESS	ATTAIL AND ALT THE ARROW					2.3 STREET ADDRESS							
CITY-ST-ZIP	V DELETE					2.4 CITY-ST-ZIP 31 TITLE					Change	Addition	
NAME	FREEMAN, ROSE					32 NAME					C Change	C) Audition	
STREET ADDRESS	AAR AR AND ILM HAARA					3.3 STREET ADDRESS							
CITY-ST-ZIP	11411 4515 51 = 21					3 4. CITY - ST - ZIP							
TITLE	D			☐ DELETE	4.1 TIT						Change	Addition	
NAME	POIRIER, R	ΆΥ			4. 2 NA	ME							
STREET ADORESS						4.3 STREET ADDRESS						İ	
CITY-ST-ZIP	HALLANDA	LE FL 33009				Y-\$T-2	ZIP						
TITLE	0			☐ DELETE	5.1 TIT						☐ Change	☐ Addilion	
NAME	BUDREAU.	(0-) B(DUDREAU	5.2 NA								
STREET ADDRESS	215 SE 3R	:				REET AD						ļ	
CITY-ST-ZIP	HALLANDA ST	LC PL 3009		DELETE		Y-\$1-7	ZIP				Channe	Addition.	
TITLE NAME	SI FITZGIBBOI	NÇ DITL		☐ DECEIE	6.1 T(T)	-					Change	☐ Addition	
NAME STREET ADDRESS					6.2 NAI		DBECC						
	test the test of t					6.3 STREET ADDRESS 6.4 CITY-ST-ZIP							
CITY-ST-ZIP	I UNTERNITA	LE, FL WWW			6.4 CIT	Y-SI-Z	ZIP						

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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