

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90005 045 ****61.25

DOCUMENT # 715370 1. Entity Name GARDEN-AIRE VILLAGE SOUTH, INC.					
Principal Place of Business 2350 NE 14 STREET POMPAÑO BEACH, FL 33062			Mailing Address 2350 NE 14 STREET POMPAÑO BEACH, FL 33062		
2. Principal Place of Business N/A		3. Mailing Address N/A			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092006 Chg-NP CR2E037 (11/05)	
City & State		City & State		4. FEI Number 59-1260773	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BANKS, CHRIS 2350 NE 14TH STREET CSWY # 218 POMPAÑO BEACH, FL 33062			7. Name and Address of New Registered Agent Name James W. Crighton Street Address (P.O. Box Number is Not Acceptable) 2350 NE 14th Street CSWY # 404 City Pompano Beach FL Zip Code 33062		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>James W. Crighton</i></u> Signature, typed or printed name of registered agent and title if applicable.				DATE <u>1-10-06</u> (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOYER, KIRSTEN 2350 NE 14TH ST, # 218 POMPAÑO BCH, FL 33062	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CRIGHTON, JAMES 2350 NE 14TH ST #404 POMPAÑO BEACH 33062	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ALEXANDRU, FAITH 2350 NE 14TH STREET #708 POMPAÑO BCH, FL 33062	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAPECE, PHILIP 2350 NE 14TH ST #215 POMPAÑO BEACH FL 33062	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD D'AMICO, TIMOTHY 2350 NE 14TH ST, # 711 POMPAÑO BCH, FL 33062	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PURDY, KIRK 2350 NE 14TH ST #103 POMPAÑO BCH, FL 33062	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2SD THOMPSON, DELORES 2350 NE 14TH ST, # 606 POMPAÑO BCH, FL 33062	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DE MAIO, JOSEPH 2350 N.E. 14TH ST. # 101 POMPAÑO BEACH FL 33062	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>James W. Crighton</i></u> JAMES CRIGHTON <u>1-9-06</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					