

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 12, 2008**  
**Secretary of State**

DOCUMENT# 717033

**Entity Name:** THIRD GULFSTREAM GARDEN APARTMENTS CONDOMINIUM, INC.**Current Principal Place of Business:**330 SE 2ND ST  
HALLANDALE, FL 33009 US**New Principal Place of Business:****Current Mailing Address:**330 SE 2ND ST  
OFFICE  
HALLANDALE BEACH, FL 33009 US**New Mailing Address:****FEI Number:** 59-1284052      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BALL, KATHY A PRES  
330 SE 2ND ST #401F  
HALLANDALE, FL 33009 US**Name and Address of New Registered Agent:**DUPONT, STEPHANE ATTY  
1820 E HALLANDALE BEACH BLVD  
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: STEPHANE DUPONT

05/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PRES ( ) Delete  
**Name:** BALL, KATHY  
**Address:** 330 SE 2 ST 401F  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** TREA ( ) Delete  
**Name:** GRIFFIN, JACK  
**Address:** 330 SE 2 ST #405F  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** SEC ( ) Delete  
**Name:** REININGER, ED  
**Address:** 330 SE 2 ST #403G  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** D ( ) Delete  
**Name:** BONGIORNO, LOU  
**Address:** 330 SE 2 ST #305E  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** D (X) Delete  
**Name:** ORTON, JOHN  
**Address:** 330 SE 2 ST #301G  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** D (X) Delete  
**Name:** MARKOWITZ, DARYL  
**Address:** 330 SE 2ND ST #404F  
**City-St-Zip:** HALLANDALE, FL 33009 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VP (X) Change ( ) Addition  
**Name:** GRIFFIN, JACK  
**Address:** 330 SE 2 ST #405F  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** TREA (X) Change ( ) Addition  
**Name:** RAY, WILENSKI  
**Address:** 330 SE 2 ST #503F  
**City-St-Zip:** HALLANDALE, FL 33009 US**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY BALL

PRES

05/12/2008

Electronic Signature of Signing Officer or Director

Date