

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722774

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CLOVER GARDENS CONDOMINIUM, INC.

## Current Principal Place of Business:

7100 W COMMERCIAL BLVD.  
STE. 107  
LAUDERHILL, FL 33319

## New Principal Place of Business:

6915 TAFT STREET  
HOLLYWOD, FL 33024

## Current Mailing Address:

7100 WEST COMMERCIAL BLVD  
SUITE 107  
LAUDERHILL, FL 33319 US

## New Mailing Address:

6915 TAFT STREET  
HOLLYWOOD, FL 33024 US

FEI Number: 59-1510660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMBASSADOR COMMUNITY MANAGEMENT INC  
7100 W COMMERCIAL BLVD STE 107  
LAUDERHILL, FL 33319 US

## Name and Address of New Registered Agent:

GRYPHON PROPERTY MANAGEMENT INC  
6915 TAFT STREET  
HOLLYWOOD, FL 33024 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: PAUL J SHAI PRO

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: JOLY, LUCIEN  
Address: 5000 NW 36TH ST, #405  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: SD (X) Delete  
Name: DENISE, JOLIN T  
Address: 5000 NW 36TH ST., #502  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: PD ( ) Delete  
Name: GOSSELIN, GUY-RENE  
Address: 5000 NW 36 ST., #611  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: 2VPD ( ) Delete  
Name: MAHEUX, PAUL H  
Address: 5000 NW 36 ST., #507  
City-St-Zip: LAUD. LAKES, FL 33319

Title: TD ( ) Delete  
Name: BOSSE, JEANNINE  
Address: 5000 NW 36ST., #602  
City-St-Zip: LAUD LAKES, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 1VPD (X) Change ( ) Addition  
Name: GUILBAULT, PIERRE  
Address: 5000 NW 36TH ST, #404  
City-St-Zip: LAUDERDALE LAKES, FL 33319

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: S/TD (X) Change ( ) Addition  
Name: BOSSE, JEANNINE  
Address: 5000 NW 36ST., #602  
City-St-Zip: LAUD LAKES, FL 33319

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: PAUL J SHAPIRO

MANA

04/27/2009

Electronic Signature of Signing Officer or Director

Date