2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724975

FILED Mar 30, 2010 Secretary of State

Entity Name: MAJESTIC GARDENS CONDOMINIUM F ASSOCIATION, INC.

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

4042 NW 19TH STREET F211 LAUDERHILL, FL 33313

Current Mailing Address: New Mailing Address:

C/O S FL MGMT SERVICES

3801 N UNIVERSITY DR SUITE 310

SUNRISE, FL 33351

4042 NW 19TH STREET
F211
LAUDERHILL, FL 33313

FEI Number: 59-1514306 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:

RAMPERSAD, ANTIONETTE 4042 NW 19TH STREET F-407 LAUDERHILL, FL 33313 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: RAMPERSAD, ANTIONETTE Address: 4042 NW 19TH STREET City-St-Zip: SUNRISE, FL 33313

Title: S

Name: FAZIO, CHARLES
Address: 4042 NW 19TH STREET
City-St-Zip: LAUDERHILL, FL 33313

Title:

Name: DUMAS, GEORGE Address: 4042 NW 19TH STREET City-St-Zip: LAUDERHILL, FL 33313

Title: VP

Name: CARLYLE, RAYMOND
Address: 4042 NW 19TH STREET
City-St-Zip: LAUDERHILL, FL 33313

Title:

Name: SMITH, PETER
Address: 4042 NW 19TH STREET
City-St-Zip: LAUDERHILL, FL 33313

Title: [

Name: MAXWELL, IRMA
Address: 4042 NW 19TH STREET
City-St-Zip: LAUDERHILL, FL 33313

I hereby 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 all other like empowered.

SIGNATURE: KATHY KOMOREK PM 03/30/2010