


2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90051 046 ****61.25

DOCUMENT # 726932

1. Entity Name
NORTH GARDEN CONDOMINIUM OF DEERFIELD BEACH, INC.




Principal Place of Business
700 SOUTHEAST SIXTH AVE.
DEERFIELD BEACH, FL 33441

Mailing Address
700 SOUTHEAST SIXTH AVE.
DEERFIELD BEACH, FL 33441

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

Country



04012005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1499683

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

VENI, MARGO
700 S.E. 6TH AVE.
APT. 311
DEERFIELD FL, FL 33441

7. Name and Address of New Registered Agent

Name John A. Van Houten

Street Address (P.O. Box Number is Not Acceptable)
700 SE 6th AVE. Apt 301

City Deerfield Beach FL Zip Code 33441

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 John A. Van Houten DATE 4/2/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005

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

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MURPHY, MAUREEN	
STREET ADDRESS	700 SE 6TH AVE	
CITY-ST-ZIP	DEERFIELD BCH, FL 33441	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MAY, VICKY	
STREET ADDRESS	700 SE 6TH AVE	
CITY-ST-ZIP	DEERFIELD BCH, FL 33441	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	BESTEDENBECK, DON	
STREET ADDRESS	700 SE 6TH AVE	
CITY-ST-ZIP	DEERFIELD BCH, FL 33441	
TITLE	D	<input type="checkbox"/> Delete
NAME	KENDIEW, TONY	
STREET ADDRESS	700 SE 6 AV	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DEVEAUX, MARY	
STREET ADDRESS	700 SOUTHEAST SIXTH AVE.	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John A. Van Houten	
STREET ADDRESS	700 SE 6th AVSUE # 301	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAROLD HEDGES	
STREET ADDRESS	700 SE 6th AVENUE #202	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GAIL TIERNEY	
STREET ADDRESS	700 SE 6th AVE # 113	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gene Kessler	
STREET ADDRESS	700 SE 6th AVE # 108	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TERESA ALLCORN	
STREET ADDRESS	700 SE 6th AVE # 102	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Agnes Backus	
STREET ADDRESS	700 SE 6th AVE # 205	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 09.07(3)(i), 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: GAIL TIERNEY DATE: 4-2-05 DAYTIME PHONE #: 771-1900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40050354
726932

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Don Bastedenbeck <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 700 SE 6th AVE # 207 Deerfield Beach, Fl 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lucille Kessler <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 700 SE 6th AVE Deerfield Beach, Fl. 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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