## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#726932**

FILED Feb 28, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 700 SOUTHEAST SIXTH AVE. DEERFIELD BEACH, FL 33441 **Current Mailing Address: New Mailing Address:** 700 SOUTHEAST SIXTH AVE DEERFIELD BEACH, FL 33441 FEI Number: 59-1499683 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLIAKOFF, GARY A J.D. BECKER A. POLIAKOFF, P.A. 3111 STIRLING ROAD FORT LAUDERDALE, FL 33312 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TIERNEY, GAIL Name: Name: 700 SE 6 AVE 113 Address: Address: City-St-Zip: DEERFIELD BCH, FL 33441 City-St-Zip: Title: () Delete Title: () Change () Addition HEDGES, HAROLD Name: Name: Address: 700 SE 6TH AVE. #202 Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GROVER, TIMOTHY GROVER, TIMOTHY Name: Name: 700 SE. 6TH AVE #214 Address: Address: 700 SE, 6TH AVE #214 City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: DEERFIELD BEACH, FL 33441 Title: ( ) Delete Title: (X) Change ( ) Addition Name: DEBERRY, JAMES Name: DEBERRY, JAMES 700 SE 6 AVE 109 Address: Address: 700 SE 6 AVE 109 City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: DEERFIELD BEACH, FL 33441 Title: () Delete Title: () Change () Addition DEVEAUX, MARY Name: Name: 700 SE 6 AVE. #111 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: () Delete Title: () Change () Addition SHEPPERD, JONI Name: Name: 700 SE 6 AVE 103 Address: Address: DEERFIELD BEACH, FL 33441 City-St-Zip: 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: GAIL TIERNEY P 02/28/2009