2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728820

FILED Apr 02, 2008 Secretary of State

Entity Name: RICHMOND'S HIDDEN GARDENS ASSOCIATION OF FORT MYERS, INC.

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

2180 WEST SR 434 SUITE 434

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 SUITE 5000

LONGWOOD, FL 32779 US

FEI Number: 59-1873398 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:

HART, JAMES W JR C/O SENTRY MANAGEMENT INC 2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: VANDERVOORT, MARY Name: TERLINDEN, GARY
Address: 7400 COLLEGE PKWY #1D

Address: 7400 COLLEGE PKWY #8C Address: 7400 COLLEGE PKWY #1D City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907

Title: VPD () Delete Title: VPD (X) Change () Addition Name: OLEARY, MICHAEL Name: SHERRARD, MARTHA

Address: 7400 COLLEGE PKWY #4C Address: 4110 BROOK FARM PL
City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: LOUISVILLE, KY 40299

Title: SD () Delete Title: () Change () Addition

 Name:
 LINEHAN, NANCY
 Name:

 Address:
 7400 COLLEGE PKWY #56C
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 TERLINDEN, GARY
 Name:
 REMLER, LUCILLE

 Address:
 856 GULF VIEW DR
 Address:
 7400 COLLEGE PKWY #1A

 City-St-Zip:
 FOND DU LAC, WI 54935
 City-St-Zip:
 FORT MYERS, FL 33907

 Name:
 ALEXANDER, EMIL
 Name:
 FERRIES, BRIAN J

 Address:
 7400 COLLEGE PARKWAY #77B
 Address:
 104 WARREN AVE

 City-St-Zip:
 FT MYERS, FL 33900
 City-St-Zip:
 ROSCOMMON, MI 48653

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: GARY TERLINDEN PD 04/02/2008