


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 733933 1. Entity Name TREE GARDEN CONDOMINIUM ASSOCIATION, INC.	
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FILED
08 MAR 17 AM 10:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1786 NORTHWEST 55TH AVENUE LAUDERHILL, FL 33313 US	Mailing Address 541 S STATE RD 7, #12 MARGATE, FL 33068 US
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03-06-08 01031 005 \$ 52.50
03072008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-1725488	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ABSOLUTE PROPERTY MANAGEMENT
541 S. STATE ROAD 7, #12
MARGATE, FL 33068

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City FL Zip Code _____

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

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	PD DURRANT, DOUGLAS <input type="checkbox"/> Delete
NAME	1746 NW 55 AVE 204
STREET ADDRESS	FORT LAUDERDALE, FL 33313
CITY-ST-ZIP	VPD LOPEZ, HERNAN <input type="checkbox"/> Delete
TITLE	1794 NW 55 AVE 201
NAME	FORT LAUDERDALE, FL 33313
STREET ADDRESS	SD ALI, MICHELLE <input type="checkbox"/> Delete
CITY-ST-ZIP	2311 NW 60TH TERR
TITLE	FORT LAUDERDALE, FL 33313
NAME	AT MCELHANEY, DELORIS <input checked="" type="checkbox"/> Delete
STREET ADDRESS	1758 NORTHWEST 55TH #204
CITY-ST-ZIP	LAUDERHILL, FL 33313
TITLE	D MINTO, SHELDON <input type="checkbox"/> Delete
NAME	1750 NW 55 AVE 204
STREET ADDRESS	FORT LAUDERDALE, FL 33313
CITY-ST-ZIP	D LAMONS, TATIANA <input checked="" type="checkbox"/> Delete
TITLE	1758 NW 55 AVE 102
NAME	FORT LAUDERDALE, FL 33313
STREET ADDRESS	CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	TD PEDRI, RAIKA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1750 NW 55TH AVE #201
STREET ADDRESS	FORT LAUDERDALE, FL 33313
CITY-ST-ZIP	D CUMMINGS, HOWARD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	272 EAST WILDWOOD LANE
NAME	DEERFIELD BEACH, FL 33442
STREET ADDRESS	D LUGO, LUIS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	1746 NW 55TH AVE #202
TITLE	FORT LAUDERDALE, FL 33313
NAME	D ALI, JOEY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2311 NW 60TH TER
CITY-ST-ZIP	SUNRISE, FL 33313
TITLE	D HYPPOLITE, JOHANNE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1754 NW 55TH AVE #201
STREET ADDRESS	FORT LAUDERDALE, FL
CITY-ST-ZIP	700121244377 <input type="checkbox"/> Change <input type="checkbox"/> Addition 03/25/08--01050--006 **18.50

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  March 14, 2008 954-749-9692
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #