

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735482

FILED
Jul 06, 2011
Secretary of State

Entity Name: GREENGLADES CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9365 W SAMPLE RD
#203
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8506
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: 59-1684523 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONDO MANAGEMENT ALTERNATIVE, INC.
9365 WEST SAMPLE ROAD
#203
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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: TD
Name: WILBUR, COLETTE
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: D
Name: WORST, SUE
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: PD
Name: FORSTER, JANE
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: VD
Name: TIRITILLI, SUSAN
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: SD
Name: CHADBURN, MARY
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: D
Name: MIKHAIL-IBRAHIM, MARGUERITE
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

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: COLETTE WILBUR

TD

07/06/2011

Electronic Signature of Signing Officer or Director

Date