

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736434

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: GARDEN PATIO VILLAS ASSOCIATION, INC.

**Current Principal Place of Business:**

7708 MARGATE BLVD  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

7708 MARGATE BLVD  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 59-1749332      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BECKER, POLIAKOFF & STREITFELD, PA  
6520 NORTH ANDREWS AVENUE  
FT LAUDERDALE, FL 333106057 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: SD ( ) Delete  
Name: FUND, HELEN  
Address: 7708 MARGATE BLVD 11-5  
City-St-Zip: MARGATE, FL 33063

Title: PD ( ) Delete  
Name: MAIL, BERNICE  
Address: 7708 MARGATE BLVD 10-3  
City-St-Zip: MARGATE, FL 33063

Title: VD ( ) Delete  
Name: RAUSHER, SYLVIA  
Address: 7708 MARGATE BLVD 5-2  
City-St-Zip: MARGATE, FL 33063

Title: TD ( ) Delete  
Name: HYMAN, MARSHALL I  
Address: 7708 MARGATE BLVD 9-3  
City-St-Zip: MARGATE, FL 33063

Title: VD ( ) Delete  
Name: MAIL, BERNARD  
Address: 7708 MARGATE BLVD 10-3  
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: HYMAN, BRENDA  
Address: 7708 MARGATE BLVD 9-3  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: SCHAEFFER, BILLIE  
Address: 7708 MARGATE BLVD 3-2  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MARSHALL HYMAN

TD

09/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date