

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737793

FILED
Apr 27, 2009
Secretary of State

Entity Name: SPRINGBROOK GARDENS, INC., A CONDOMINIUM

Current Principal Place of Business:

125 N BIRCH RD.
FT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

C/O MARK LAMBERT
125 N BIRCH RD #108
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 59-1809263 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BAKALAR, BROUGH & CHADROW, P.A.
WESTSIDE CORPORATE CENTER
150 SOUTH PINE ISLAND RD., SUITE 540
PLANTATION, FL 333242669 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: D () Delete
Name: ERICKSON, MICHAEL
Address: 125 N BIRCH RD #102
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: P () Delete
Name: LEWANDOWSKI, CAROL
Address: 125 N BIRCH RD #404
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: ANDERSON, TOM
Address: 125 N BIRCH RD #301
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: SHIELD, WILLIAM
Address: 125 N BIRCH RD #107
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: MATTHEWS, MIKE
Address: 125 N. BIRCH RD./, 209
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: LAMBERT, MARK
Address: 125 N BIRCH RD #102
City-St-Zip: FORT LAUDERDALE, FL 33304

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

Title: () Change () Addition
Name:
Address:
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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: MARK LAMBERT

T

04/27/2009

Electronic Signature of Signing Officer or Director

Date