

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740183

FILED
Apr 27, 2009
Secretary of State

Entity Name: ROSELAND GARDENS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10996 MULBERRY ST
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

P O BOX 695
ROSELAND, FL 32957

New Mailing Address:

FEI Number: 65-0126341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREUSS, RONNIE
10996 MULBERRY ST
SEBASTIAN, FL 32958 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: DOUBERLY, THOMAS
Address: 8425 CAMPBELL AVENUE
City-St-Zip: SEBASTIAN, FL 32958

Title: D () Delete
Name: PREUSS, RONNIE
Address: 10996 MULBERRY ST
City-St-Zip: SEBASTIAN, FL 32958

Title: D () Delete
Name: DOUBERLEY, ALICE
Address: 8425 CAMPBELL AVE
City-St-Zip: SEBASTIAN, FL 32958

Title: S () Delete
Name: MELNICK, GAIL
Address: 10996 MULBERRY ST
City-St-Zip: SEBASTIAN, FL 32958

Title: T () Delete
Name: PINKHAM, LAURA
Address: 8436 CAMPBELL AVE
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LAURA C PINKHAM

T

04/27/2009

Electronic Signature of Signing Officer or Director

Date