

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754536

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** HARDING GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6920 HARDING AVE.  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

6920 HARDING AVE.  
MIAMI BEACH, FL 33141

**New Mailing Address:**

**FEI Number:** 59-2373472

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIMA, HILDA  
6920 HARDING AVE. #307  
MIAMI BEACH, FL 33141 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: PD ( ) Delete  
Name: VICENTE, M  
Address: 6920 HARDING AVE, APT 403  
City-St-Zip: MIAMI BEACH, FL 33141

Title: T ( ) Delete  
Name: LIMA, HILDA  
Address: 6920 HARDING AVENUE APT 307  
City-St-Zip: MIAMI BCH., FL 33144

Title: D ( ) Delete  
Name: CASTRO, MARIA D  
Address: 6920 HARDING AVE. APT. 305  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: PEIXOTO, EDMUNDO J  
Address: 6920 HARDING AVE., #201  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: ARCHE, CHARLES  
Address: 6920 HARDING AVENUE APT 306  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S (X) Delete  
Name: GARCIA, MABEL  
Address: 6920 HARDING AVE APT 401  
City-St-Zip: MIAMI BEACH, FL 33144

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

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

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

Title: S (X) Change ( ) Addition  
Name: CASTRO, MARIA D  
Address: 6920 HARDING AVE. APT. 305  
City-St-Zip: MIAMI BEACH, FL 33141

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: HILDA LIMA

T

02/05/2009

Electronic Signature of Signing Officer or Director

Date