

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760716

FILED
Apr 27, 2009
Secretary of State

Entity Name: HAWAIIAN GARDENS PHASE IV ASSOCIATION, INC.

Current Principal Place of Business:

7100 W COMMERCIAL BLVD
STE 107
LAUDERHILL, FL 33319

New Principal Place of Business:

6915 TAFT STREET
HOLLYWOOD, FL 33024

Current Mailing Address:

7100 WEST COMMERCIAL BLVD
SUITE 107
LAUDERHILL, FL 33319 US

New Mailing Address:

6915 TAFT STREET
HOLLYWOOD, FL 33024 US

FEI Number: 65-0745829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMBASSADOR COMMUNITY MANAGEMENT INC
7100 W. COMMERCIAL BLVD
SUITE 107
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

GRYPHON PROPERTY MANAGEMENT INC
6915 TAFT ST
HOLLYWOOD, FL 33024 US

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: PAUL J SHAPIRO

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POULIOT, MAURICE
Address: 5003 N.W. 35TH ST #507
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: 1VP () Delete
Name: STERN, DEBRA
Address: 5103 NW 35TH ST., #604
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: 2VP () Delete
Name: KANNER, GILVIA
Address: 5103 NW 35TH ST #501
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TD () Delete
Name: GOSSELIN, GUY
Address: 5000 N.W. 36TH ST #611
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: S () Delete
Name: GRENIER, ROGER
Address: 5000 NW 30TH #503
City-St-Zip: FORT LAUDERDALE, FL 33319

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: PAUL J SHAPIRO

MANA

04/27/2009

Electronic Signature of Signing Officer or Director

Date