

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768467

FILED  
Mar 31, 2011  
Secretary of State

**Entity Name:** HAWAIIAN GARDENS TWIN LAKES PHASE III ASSOCIATION, INC.

**Current Principal Place of Business:**

7100 W. COMMERCIAL BLVD  
STE 107  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

7100 W. COMMERCIAL BLVD  
STE 107  
LAUDERHILL, FL 33319

**New Mailing Address:**

**FEI Number:** 59-2606730      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

AMBASSADOR COMMUNITY MANAGMENT  
7100 W COMMERCIAL BLVD  
STE 107  
LAUDERHILL, FL 33319 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  
Name: FONTAINE, JACQUES  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

Title: 1VPD  
Name: AUDETTE, JACKIE  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

Title: 2VPD  
Name: SIMARD, GILBERT  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

Title: SD  
Name: BELANGER, MICHEL  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

Title: TD  
Name: VAILLANCOURT, YVAN  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

Title: D  
Name: FECTEAU, YVAN  
Address: 7100 W. COMMERCIAL BLVD., STE. 107  
City-St-Zip: LAUDERHILL, FL 33319

I hereby 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 all other like empowered.

SIGNATURE: JACQUES FONTAINE

PD

03/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date