

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769539

FILED
Apr 14, 2009
Secretary of State

Entity Name: GARDEN LAKES VILLAGE I ASSOCIATION, INC.

Current Principal Place of Business:

4920 FRUTVILLE ROAD
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

4920 FRUTVILLE ROAD
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-2383844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEIL, WARREN
MA-CON INC.
4920 FRUITVILLE ROAD
SARASOTA, FL 34237 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: VPD () Delete
Name: SOLDWEDDEL, WARREN
Address: 5504 GARDEN LAKES OAK
City-St-Zip: BRADENTON, FL

Title: SD () Delete
Name: MICHAELS, TERRY
Address: 5509 GARDEN LAKES OAK
City-St-Zip: BRADENTON, FL 34203

Title: TD () Delete
Name: LASH, FRAN
Address: 5507 GARDEN LAKES OAK
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: YOUNG, ALDOUS
Address: 5512 GARDEN LAKES OAK
City-St-Zip: BRADENTON, FL 34203

Title: PD () Delete
Name: MOORE, MARY L
Address: 5502 GARDEN LAKES OAK
City-St-Zip: BRADENTON, FL 34203

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: MARY L MOORE

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date