


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90180 016 ****61.25

DOCUMENT # 769540 1. Entity Name GARDEN LAKES COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 4920 FRUITVILLE RD SARASOTA, FL 34232 US			Mailing Address 4920 FRUITVILLE RD #20 SARASOTA, FL 34232 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2384093	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
MA-CON, INC. 4920 FRUITVILLE RD SARASOTA, FL 34232				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TABER, JOSEPH 5800 GARDEN LAKES FERN BRADENTON, FL 34203 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HARPER, PATRICIA 5643 GARDEN LAKES PALM BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DRALUS, RITA 5536 37TH STREET EAST BRADENTON, FL 34203 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ERTEL, MIKE 5820 GARDEN LAKES DRIVE BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WIELAND, KEN 5803 GARDEN LAKES DRIVE BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEISINGER, KEN 5811 GARDEN LAKES FERN BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADELMAN, HARRY 5502 37TH ST E BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYAN, BILL 5642 GARDEN LAKES DRIVE BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRUELLE, VIRGINIA 5634 GARDEN LAKES PALM BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAGEE, BILL 3608 GARDEN LAKES CLENET BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLDWEDEL, WARREN 5504 GARDEN LAKES OAK BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Rita Dralus</i> RITA DRALUS			4-30-08 941-343-1002 <small>Date Daytime Phone #</small>		