2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770564

FILED Apr 17, 2008 Secretary of State

Entity Name: GARDENS AT PALM-AIRE COUNTRY CLUB ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 US				2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US			
Current Mailing Address:				New Mailing Address:			
2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 US				2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US			
FEI Number:	59-2432045	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status	s Desired ()
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of	New Registered A	gent:
HART, JAMES W JR 2180 W SR 434, STE 5000 LONGWOOD, FL 32779 US				HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US			
The above in the State		ubmits this statement for the pu	irpose o	f changing it	ts registered of	office or registered	agent, or both,
SIGNATUR	RE: JAMES W	HART JR			04/17/2008		
	Electronic	Signature of Registered Agen	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (X) I SEAMON, KEN 5747 GARDENS SARASOTA, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () [BEAMISH, MARII 5671 GARDENS SARASOTA, FL	DR		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD ()[EVERSON, SUE 5755 GARDENS SARASOTA, FL			Title: Name: Address: City-St-Zip:	PD (X EVERSON, SU 5755 GARDEN SARASOTA, F	IS DR	
Title: Name: Address: City-St-Zip:	TD ()[LEONARD, SAM 5697 GARDENS SARASOTA, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D ()[YORK, JAMES J 5707 GARDENS SARASOTA, FL	DR		Title: Name: Address: City-St-Zip:	D (X RUBIN, MAIA 8406 GARDEN SARASOTA, F		
Title: Name: Address: City-St-Zip:	D () [TORKE, MARY 5667 GARDENS SARASOTA, FL			Title: Name: Address: City-St-Zip:	VPD (X TORKE, MARY 5667 GARDEN SARASOTA, F	IS DR	

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: SUE EVERSON PD 04/17/2008