


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90026 002 ***138.75

DOCUMENT # L02000015837					
1. Entity Name NORTH GARDEN ASSOCIATES, LLC					
Principal Place of Business 1000 ELDORADO AVE CLEARWATER BEACH, FL 33767			Mailing Address P.O. BOX 1558 CLEARWATER, FL 33757		
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 34-2004041	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent POLLACK, RONALD J 1000 ELDORADO AVE CLEARWATER, FL 33767				7. Name and Address of New Registered Agent Name Richard P. Tinkelenberg Street Address (P.O. Box Number is Not Acceptable) 1216 Nelson Avenue City Clearwater FL Zip Code 33755-3652	
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 <i>Richard P. Tinkelenberg</i> Richard P. Tinkelenberg April 25, 2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR POLLACK, RONALD J 1000 ELDORADO AVE CLEARWATER, FL 33767		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *R. Pollack* **Ronald J. Pollack** **April 28, 2008** **727-725-5225**