

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 30, 2009
Secretary of State**

DOCUMENT# N00000004385

Entity Name: THE GARDENS AT HIGHLAND BEACH SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1113 HIGHLAND BEACH DR.
HIGHLAND BEACH, FL 33487

New Principal Place of Business:

1109 HIGHLAND BEACH DR.
HIGHLAND BEACH, FL 33487

Current Mailing Address:

MR. ROBERT DESIMONE
9 LAUREL CT.
OAKLAND, NJ 07436

New Mailing Address:

FEI Number: 65-1035441 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DE SIMONE, ROBERT
1109 HIGHLAND BEACH DRIVE
HIGHLAND BEACH, FL 33487 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIEGEL, NICOLE
Address: 1113 HIGHLAND BEACH DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Delete
Name: CONVERSE, CHRISTINE
Address: 1111 HIGHLAND BEACH DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: SIMONE, ROBERT D
Address: 1109 HIGHLAND BEACH DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33413

Title: D (X) Change () Addition
Name: DE SIMONE, ROBERT
Address: 1109 HIGHLAND BEACH DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33413

Title: ST () Delete
Name: LEVY, DAVID
Address: 1115 HIGHLAND BEACH DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33487

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: ROBERT DE SIMONE

D

06/30/2009

Electronic Signature of Signing Officer or Director

Date