

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007610

FILED
May 29, 2007
Secretary of State

Entity Name: GARDEN VILLAS CONDOMINIUM III ASSOCIATION, INC.

Current Principal Place of Business:

2951 W 80 STREET
101
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

PO BOX 160718
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 65-1105878 **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:

FLORIDA'S PROPERTY MANAGEMENT
2500 W 78 STREET BAY #4
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

FLORIDA'S PROPERTY MANAGEMENT
5979 NW 151 STREET
101
MIAMI LAKES, FL 33014 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: _____

05/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SEQUINA, RAFAEL
Address: PO BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: T () Delete
Name: HERNANDEZ, ROXANA
Address: PO BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: S () Delete
Name: GARCIA, JOSE Z
Address: PO BOX 160718
City-St-Zip: HIALEAH, FL 33016

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:

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: RAFAEL SEQUINA

P

05/29/2007

Electronic Signature of Signing Officer or Director

Date