## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000008281

FILED Mar 31, 2010 Secretary of State

Entity Name: GARDENIA OCEANFRONT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2195 HWY A1A

INDIAN HARBOR BEACH, FL 32937

Current Mailing Address:

C/O FAIRWAY MANAGEMENT, INC 1331 BEDFORD DRIVE SUITE 103

MELBOURNE, FL 32940

FEI Number: 59-3758316 FEI Number Applied For ( ) FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Nam

FAIRWAY MANAGEMENT 1331 BEDFORD DRIVE SUITE 103

MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

C/O DEPENDABLE PROPERTY MANAGEMENT, LLC

DEPENDABLE PROPERTY MANAGEMENT, LLC 1680 HIGHWAY A1A, STE 1

SATELLITE BEACH, FL 32937 US

**New Mailing Address:** 

1680 HIGHWAY A1A, STE 1

SATELLITE BEACH, FL 32937

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: ANGELA M. PHILLIPS

03/31/2010 Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

Title: [

 Name:
 PANTANO, SAM

 Address:
 3277 RIDGETOP WAY

 City-St-Zip:
 EDGEWOOD, KY 41017 32

Title: PD

 Name:
 KNOWLES, CHARLOTTE

 Address:
 2302 WOODFIELD CIRCLE

 City-St-Zip:
 MELBOURNE BEACH, FL 32904

Title: VPD

Name: GONTKOF, JOHN Address: 2195 HWY A1A #902

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: TD

Name: CHANEY, ALICE Address: 2195 HWY A1A # 802

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title:

Name: STRANGE, JACK Address: 2195 HWY A1A, #502

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: [

 Name:
 CAUDLE, JEANNE

 Address:
 P.O. BOX 410187

 City-St-Zip:
 MELBOURNE, FL 32941

I hereby 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 all other like empowered.

SIGNATURE: CHARLOTTE KNOWLES P 03/31/2010