2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04979

1. Entity Name

FORMOSA GARDENS MASTER PROPERTY OWNERS' ASSOCIATION, INC.



40000197

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Principal Place of Business 7836 W. IRLO BRONSON HWY KISSIMMEE, FL 34747 US Mailing Address

7836 W. IRLO BRONSON HWY KISSIMMEE, FL 34747 US

FILED

Jan 08, 2007 8:00 am Secretary of State

01-08-2007 90247 028 ****61.25

DO NOT WRITE IN THIS SPACE

01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number Applied For S9-2541941 Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

CHEN, GEORGE 7836 W. IRLO BRONSON HWY KISSIMMEE, FL 34747

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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					
	Signature, typed or printed name of registered agent and title	il applicable (NOTE Registered	Agent signatur	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALISBURY, JAMES 7836 W IRLO BRONSON HWY KISSIMMEE, FL 34747		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHEN, JOSEPHINE 7836 W IRLO BRONSON HWY KISSIMMEE, FL 34747				
NAME STREET ADDRESS CITY-ST-ZIP	D CHEN, GEORGE 7836 W. IRLO BRONSON HWY KISSIMMEE, FL 34747				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					