

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006245

FILED  
Mar 19, 2008  
Secretary of State

Entity Name: GARLAND CONDOMINIUM ASSN., INC.

## Current Principal Place of Business:

901 NW 8TH AVENUE  
SUITE A-6  
GAINESVILLE, FL 32601

## New Principal Place of Business:

NW 21ST AVE  
GAINESVILLE, FL 32609

## Current Mailing Address:

901 NW 8TH AVENUE  
SUITE A-6  
GAINESVILLE, FL 32601

## New Mailing Address:

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607

FEI Number: 20-3026451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, SALLY ANN  
C/O SUN LU PROPERTIES, INC  
901 NW 8TH AVENUE, SUITE A-6  
GAINESVILLE, FL 32601 US

## Name and Address of New Registered Agent:

SAUSAMAN, D JEFFREY  
C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607 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: D JEFFREY SAUSAMAN

03/19/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: BANKS, KATRIN  
Address: 919 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

Title: VPD ( ) Delete  
Name: TREVISANI, DANTE  
Address: 925 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

Title: STD ( ) Delete  
Name: LANE, MATTHEW  
Address: 851 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition  
Name: TREVISANI, DANTE  
Address: 925 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

Title: TD (X) Change ( ) Addition  
Name: LANE, MATTHEW  
Address: 851 NW 21ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

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: KATRIN BANKS

P

03/19/2008

Electronic Signature of Signing Officer or Director

Date