2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006266

FILED Apr 23, 2007 Secretary of State

Entity Name: FOGARTY GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
5730 2ND KEY WES	AVENUE, SUIT ST, FL 33040	E 1		
Current N	Mailing Address	s:	New Mailing Addres	ss:
) AVENUE, SUIT ST, FL 33040	E 1		
FEI Numbe	r:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name an	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
5730 2ND	Z, RAYMOND) AVENUE, SUIT ST, FL 33040	US		
Th	بمانين والمستمين	، الماط والمكاطور ما معالمها للماط الماط المعارس الماط		
	e named entity si te of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	te of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
in the Stat	te of Florida. IRE:	ubmits this statement for the posterior the posterior that a construction of Registered Agreement for the posterior content of the posterior of Registered Agreement for the Registered Agreement for t		ed office or registered agent, or both, Date
in the Stat	te of Florida. IRE:	c Signature of Registered Ag	ent	
in the Stat	te of Florida. IRE: Electroni S AND DIRECT	c Signature of Registered Ag FORS: Delete MOND UE, SUITE 1	ent	Date
in the State SIGNATU OFFICER Title: Name: Address:	te of Florida. JRE: Electroni RS AND DIRECT P () I VAZQUEZ, RAYN 5730 2ND AVEN KEY WEST, FL	c Signature of Registered Agr ORS: Delete MOND UE, SUITE 1 33040 Delete UE, SUITE 1	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS
in the State SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	te of Florida. IRE: Electroni S AND DIRECT P ()I VAZQUEZ, RAYN 5730 2ND AVEN KEY WEST, FL V ()I PEREZ, ALLEN 5730 2ND AVEN KEY WEST, FL	c Signature of Registered Agronal Corporation of Registered Agronal Corpor	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS () Change () Addition

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: CAROLINE VAZQUEZ MGRM 04/23/2007