

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006824

FILED
Apr 26, 2007
Secretary of State

Entity Name: FIORE AT THE GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2600 N MILITARY TRL STE 100
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2600 N MILITARY TRL STE 100
BOCA RATON, FL 33431

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUBIN, DAVID
2600 N MILITARY TRL STE 100
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JESSEE, TIA
Address: 2600 N MILITARY TRL STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: V () Delete
Name: KUBIN, DAVID
Address: 2600 N MILITARY TRL STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: S () Delete
Name: BELZ, DIANE
Address: 2600 N MILITARY TRL STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: T () Delete
Name: BARR, VIRGINIA
Address: 2600 N MILITARY TRL STE 100
City-St-Zip: BOCA RATON, FL 33431

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:

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: BETH VOLLERO

CFO

04/26/2007

Electronic Signature of Signing Officer or Director

Date