

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07729

FILED
Feb 02, 2009
Secretary of State

Entity Name: THE GARDEN HOMES AT THE MOORS MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

17321 NW 66 CT
MIAMI, FL 33015 US

New Principal Place of Business:

Current Mailing Address:

% THE CONTINENTAL GROUP, INC
11981 SW 144 CT, #201
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-2631522 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
GLOBAL COMMERCE CENTER
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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: T () Delete
Name: MURPHY, CHARLES
Address: 17321 NW 66 CT
City-St-Zip: MIAMI, FL 33015

Title: VS () Delete
Name: FRIEDMAN, MAUREEN,
Address: 17321 NW 66 CT
City-St-Zip: MIAMI, FL 33015

Title: P () Delete
Name: GRAVEILINE, DAVE
Address: 17321 NW 66 CT
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: RAMIREZ, SERGIO
Address: 18169 NW 62 CT.
City-St-Zip: HIALEAH, FL 33015

Title: D () Delete
Name: WEEKES, ARLENE
Address: 6256 NW 175 TERR
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FRIEDMAN, MAUREEN,
Address: 17321 NW 66 CT
City-St-Zip: MIAMI, FL 33015

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: MAUREEN FRIEDMAN

VP

02/02/2009

Electronic Signature of Signing Officer or Director

Date