2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2008 8:00 am
Secretary of State
04-15-2008 90016 010 ****61.25

DOCUMENT # N09194

1. Entity Name

GARNIER'S CAY TOWNHOMES ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~249 SHALIMAR DRIVE~~ 233 Shalimar Drive SHALIMAR FL 32579 US	P. O. BOX 13 SHALIMAR FL 32579 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
233 Shalimar Dr.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Shalimar FL	City & State
Zip: 32579 Country	Zip Country

4. FEI Number: 58-1631998 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~LEE, KRISTINE K~~ ~~249 SHALIMAR DRIVE~~ ~~SHALIMAR FL 32579~~ Deniz Harris	Name: Deniz Harris Street Address (P.O. Box Number is Not Acceptable): 233 Shalimar Dr City: Shalimar FL Zip Code: 32579

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] 03-25-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ LEE, KRISTINE K 249 SHALIMAR DR SHALIMAR FL 32579	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Additi
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PEREZ, NINA 209 SHALIMAR DR SHALIMAR FL 32579	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Additi
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PERAHIA, BARAK 207 SHALIMAR DR SHALIMAR FL 32579	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Additi
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Charles Hansen 225 Shalimar Dr Shalimar FL 32579	☐ Change ☒ Additi
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Additi

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Barak Perahia Treasurer 21 Mar 08 850 ~~00~~ 833-8146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #