

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14165

FILED  
Jan 17, 2009  
Secretary of State

**Entity Name:** NORTH GARDEN VILLAS, INC., A CONDOMINIUM

**Current Principal Place of Business:**

13952 NE 4TH AVE  
N MIAMI, FL 33161 US

**New Principal Place of Business:**

**Current Mailing Address:**

13952 NE 4TH AVE  
UNA EDWARDS  
N MIAMI, FL 33161 US

**New Mailing Address:**

13952 NE 4TH AVE  
N MIAMI, FL 33161 US

**FEI Number:** 65-0057034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EDWARDS, UNA  
13952 NE 4TH AVE  
N MIAMI, FL 33161 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: PD ( ) Delete  
Name: PAHL, MICHAEL,  
Address: 1480 NE 130TH ST  
City-St-Zip: N MIAMI, FL

Title: TD ( ) Delete  
Name: PORTIA, CANTY  
Address: 13904 NE 4AVE  
City-St-Zip: MIAMI, FL 33161

Title: SD ( ) Delete  
Name: EDWARDS, UNA  
Address: 13952 NE 4TH AVENUE  
City-St-Zip: NORTH MIAMI, FL

Title: PD ( ) Delete  
Name: SALGADO, ORLANDO  
Address: 800 NE 195 ST #420  
City-St-Zip: N. MIAMI BEACH, FL 33179

**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: UNA EDWARDS

TREA

01/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date