


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90285 018 ****61.25

DOCUMENT # N21398

1. Entity Name
GARDENS OF SWEETWATER CONDOMINIUM I ASSOCIATION, INC.



Principal Place of Business
18258 COVINA WAY
APT. #201
BOCA RATON, FL 33498 US

Mailing Address
18258 COVINA WAY
APT. #201
BOCA RATON, FL 33498 US

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
18258 COVINA WAY
 Suite, Apt. #, etc.
Apt # 101

City & State
BOCA RATON FL

Zip
33498

Country
US

01192005 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0182595

Applied For
 Not Applicable

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



6. Name and Address of Current Registered Agent
MARGANELLI, IRENE
18258 COVINA WAY
#201
BOCA RATON, FL 33498

7. Name and Address of New Registered Agent
 Name
Howard McClelland
 Street Address (P.O. Box Number is Not Acceptable)
18258 Covina Way
#101
 City
Boca Raton FL Zip Code
33498

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 Howard McClelland **HOWARD MCCLELLAND** **1-24-05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	PERLMAN, GOLDIE	18258 COVINA WAY	BOCA RATON, FL	<input checked="" type="checkbox"/>
VPD	REGAN, KEITH	18258 COVINA WAY	BOCA RATON, FL	<input type="checkbox"/>
TD	MARGANELLI, IRENE	18258 COVINA WAY	BOCA RATON, FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P/T/D	MARGANELLI, IRENE	18258 COVINA WAY, #201	BOCA RATON, FL 33498	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S/D	MCCLELLAND, HOWARD	18258 COVINA WAY, #101	BOCA RATON, FL 33498	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 Irene Marganelli **IRENE MARGANELLI** **1-24-05** **561-487-9730**
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #