

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 08, 2007 8:00 am
Secretary of State

05-21-2007 90051 006 ****61.25

DOCUMENT # N26493					
1. Entity Name GARDENS OF SWEETWATER CONDOMINIUM 2 ASSOCIATION, INC.					
Principal Place of Business C/O P. GOLDMAN 18274 COVINA WAY BOCA RATON FL 33498			Mailing Address C/O P. GOLDMAN 18274 COVINA WAY BOCA RATON FL 33498		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent GOLDMAN FLORENCE 18274 COVINA WAY BOCA RATON FL 33498				7. Name and Address of New Registered Agent Name Muriel Krebs Street Address (P.O. Box Number is Not Acceptable) 18266 COVINA WAY 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 <i>Muriel Krebs</i> (NOTE: Registered Agent signature required when transferring) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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	P	☒ Delete	TITLE	☐ Change ☐ Addition	
NAME	GOLDMAN, FLORENCE		NAME		
STREET ADDRESS	18274 COVINA WAY		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON FL 33498		CITY-STATE-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	KREBS, MURIEL		NAME	<i>Treasurer</i>	
STREET ADDRESS	18266 COVINA WAY APT 202		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON FL		CITY-STATE-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	KREBS, MURIEL		NAME		
STREET ADDRESS	18266 COVINA WAY #102		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON FL		CITY-STATE-ZIP		
TITLE	P	☒ Delete	TITLE	☐ Change ☐ Addition	
NAME	GOLDMAN, FLORENCE		NAME		
STREET ADDRESS	18274 COVINA WAY #201		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON FL 33498		CITY-STATE-ZIP		
TITLE	EMMA SEDAR	☐ Delete	TITLE	<i>President</i> ☒ Change ☒ Addition	
NAME	18266 COVINA WAY		NAME		
STREET ADDRESS	BOCA RATON, FL 33498		STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE	Shirley Biolo	☐ Delete	TITLE	<i>Secretary</i> ☒ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
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: <i>Muriel Krebs</i> (Inas.) MAY 1, 07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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