2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28843

FILED Feb 24, 2012 Secretary of State

Entity Name: THE GARDENS AT SEVEN HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

QUALIFIED PROPERTY MANAGEMENT, INC

New Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT INC 5901 US HWY 19, STE 7Q

5901 US HWY 19, STE 7Q

NEW PORT RICHEY, FL 34652

NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

New Mailing Address:

C/O QUALIFIED PROPERTY MGMT INC 5901 US HWY 19, STE 7Q

QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19, STE 7Q

NEW PORT RICHEY, FL 34652

NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2931273

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MGMT INC 5901 US HWY 19

QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19

SUITE 7Q

FEI Number Applied For ()

SUITE 7Q

NEW PORT RICHEY, FL 34652 US

NEW PORT RICHEY, FL 34652 US

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: MARY A. WHITE

02/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

PRES

FRANCONERI, RICHARD Name: 5901 US HWY 19, STE 7Q Address:

City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title:

DIETZEL, THOMAS Name: Address: 5901 US HWY 19, STE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: **TREA**

PIPKIN, LINDA Name:

Address: 5901 US HWY 19, STE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DKG

Name: GEMBICKI, TADEUS Address: 5901 US HWY 19, STE 7Q NEW PORT RICHEY, FL 34652 US

City-St-Zip:

Title: Name:

ACTON, KEN

5901 US HWY 19, STE 7Q Address: NEW PORT RICHEY, FL 34652 US City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: RICHARD FRANCONERI

PRES

02/24/2012