2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 8:00 am Secretary of State

DOCUMENT # N9400000887 1. Entity Name BENNET'S GARDEN NEIGHBORHOOD ASSOCIATION, INC.					05-02-2005 90493 034 ****61.25			
Principal Place of Business 5330 SW 91ST TERR 5330 SW 91ST TERR GAINESVILLE, FL 32608 GAINESVILLE, FL 32608			08			. •		
5341 SW 91st Terrace		3. Mailing Address 5341 SW 91st Terrace			_	- - - - - - - - - - - - -		
Suite, Apt. #, etc. Suite A		Suite, Apt. #, etc. Suite A			02072005 Chg	j-NP CR2	E037 (10/03)	
City & State Gainesville, FL		City & State Gainesville, FL		4. FEI Number 59-3385102			oplied For ot Applicable	
Zip	Country	Zip		intry	5. Certificate of Stat		\$8.75 Add	ditional
32608		32608	Alaq	hua		ess of New Registers	Fee Require	d
<u></u>	6. Name and Address of Current R	egistered Agent		Name	7. Name and Addic	.33 Of Heat Hegisters	.a Agoin	
MEDINA, RICK 5330 SW 91ST TERR GAINESVILLE, FL 32608				Street Address (P.O. Box Number is Not Acceptable)				
•		City				L Zip Cod		
	named entity submits this statement for tions of registered agent.	the purpose of changing its	registere	ed office or registe	ered agent, or both, in th	ne State of Florida. Ta	am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable (NOT	· · · ·	d Annal vinnature require		DAT		
1	Digitatore, types at printed theme or registeres again an	u title ii applicable. (1401	E: Hegistered	a Agent signature require	ed when reinstating)	DAI	E	
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Car Trust Fund (mpaign F	inancing	\$5.00 May Be Added to Fees	Make ch	eck payable to	
10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DIRE	9. Election Car Trust Fund (mpaign F	inancing	\$5.00 May Be	Make ch Florida Dej	eck payable to partment of S	tate
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Interest certify that the information supplied with this filling does not quality 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR