

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000427

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: GARDENS I OF ST. ANDREWS ASSOCIATION, INC.

## Current Principal Place of Business:

C/O CAPRI PROPERTY MGMT. INC  
810 B PINEBROOK ROAD  
VENICE, FL 34292

## New Principal Place of Business:

810 B PINEBROOK RD  
VENICE, FL 34285

## Current Mailing Address:

C/O CAPRI PROPERTY MGMT. INC  
810 B PINEBROOK ROAD  
VENICE, FL 34292

## New Mailing Address:

C/O CAPRI PROPERTY MGMT, INC.  
810 B PINEBROOK RD  
VENICE, FL 34285

FEI Number: 65-0556144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPRI PROPERTY MANAGEMENT, INC.  
810B PINEBROOK RD.  
VENICE, FL 34292 US

## Name and Address of New Registered Agent:

CAPRI PROPERTY MANAGEMENT, INC.  
810 B PINEBROOK RD  
VENICE, FL 34285 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: DEBBIE GREEN

01/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GROSSMAN, RUTH  
Address: 804 MONTROSE DR #104  
City-St-Zip: VENICE, FL 34293

Title: STD ( ) Delete  
Name: MILLER, LORRAINE  
Address: 802 MONTROSE DR., #204  
City-St-Zip: VENICE, FL 34293

Title: VD ( ) Delete  
Name: BURNS, CHARLES W  
Address: 804 MONTROSE DR. #103  
City-St-Zip: VENICE, FL 34293

Title: AS (X) Delete  
Name: GREEN, DEBBIE  
Address: 810B PINEBROOK RD.  
City-St-Zip: VENICE, FL 34285

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GROSSMAN, RUTH  
Address: 810 B PINEBROOK RD  
City-St-Zip: VENICE, FL 34285

Title: VPD (X) Change ( ) Addition  
Name: BURNS, BILL  
Address: 810 B PINEBROOK RD  
City-St-Zip: VENICE, FL 34285

Title: STD (X) Change ( ) Addition  
Name: PELLETIER, DIANE  
Address: 810 B PINEBROOK RD  
City-St-Zip: VENICE, FL 34285

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: DIANE PELLETIER

STD

01/30/2009

Electronic Signature of Signing Officer or Director

Date