## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001399

FILED Mar 14, 2008 Secretary of State

Entity Name: LE JARDIN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: 4201 GULF SHORE BLVD. NO.			New Principal Pl	New Principal Place of Business:	
NAPLES, F		JS			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
4201 GULF SHORE BLVD. NO. NAPLES, FL 34103 US					
FEI Number:	65-0736748	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Addre	ss of New Registered Agent:	
850 PARK 3RD FL	I. FALK / ROI SHORE DRIV IL 34103 US				
The above in the State		submits this statement for the pu	rpose of changing its regis	tered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ager	t	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD ( BROWN, BRA 4201 GULF SH NAPLES, FL	HORE BLVD N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCLAUGHLIÑ	HORE BLVD. N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GARBER, ANN	HORE BLVD. N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NUNNELLY, W	HORE BLVD. NO.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ROGERS, DAV 4201 GULFSH NAPLES, FL 3	ORE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANNE GARBER PRES 03/14/2008