

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004499

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** GARDENS III AT WATERSIDE VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

THE MGMT. SERVICES OF VENICE  
3380 RUSTIC RD.  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

**Current Mailing Address:**

THE MGMT. SERVICES OF VENICE  
3380 RUSTIC RD.  
NOKOMIS, FL 34275 US

**New Mailing Address:**

**FEI Number:** 59-3462589

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OGRADY, CYNTHIA  
3380 RUSTIC RD.  
NOKOMIS, FL 34275 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RODRIGUEZ, JOW  
Address: 210 SILVER LAKE DRIVE, #201  
City-St-Zip: VENICE, FL 34292

Title: STD ( ) Delete  
Name: PLANIN, PEGGY  
Address: 208 SILVER LAKE DRIVE, #206  
City-St-Zip: VENICE, FL 34292

Title: STD ( ) Delete  
Name: DONOHUE, MARIE  
Address: 206 SILVER LAKE DR. #205  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RODRIGUEZ, JOE  
Address: 210 SILVER LAKE DRIVE, #201  
City-St-Zip: VENICE, FL 34292

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOE RODRIGUEZ

PD

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date