

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2008 8:00 am
Secretary of State

05-09-2008 90007 006 ****61.25

DOCUMENT # N98000000815

1. Entity Name
GARDENS ESTATE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**300 ARAGON AVE
SUITE 210
CORAL GABLES, FL 33134**

Mailing Address
**300 ARAGON AVE
SUITE 210
CORAL GABLES, FL 33134**

40100000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0939705

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SCHUMER, KARL
200 S BISCAYNE BLVD
20TH FLOOR
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TINDER, DAVID 12544 SW 119TH PLACE MIAMI, FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CASTANO, MARITZA 12545 SW 120TH AVE. MIAMI, FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT TOLLEY, SHAWN 12463 S W 119TH PLACE MIAMI, FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMILEY, LINDA 12546 SW 120TH AVE MIAMI, FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, TODD 12467 SW 121ST AVE. MIAMI, FL 33186	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAVEZ, RUBEN 12584 SW 119 PLACE MIAMI, FL 33186	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Perez, Marta C 12547 SW 121 Ave. MIAMI, FL 33186	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/08

786 293 2420