2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

5/5,

DOCUMENT # P02000000939

1. Entity Name
GARDENS CAPITAL CORP.

44003927

Principal Place of Business	Mailing Address
11641 KEW GARDENS AVE., #101	11641 KEW GARDENS AVE., #101
PALM BEACH GARDENS FL 33410	PALM BEACH GARDENS FL 33410

2. Principal Place of Business
3601 PGA Blvd

Suite, Apt. #, etc.
301

City & State
Palm Beach Gardens FL

Zip 33410   Country

3. Mailing Address
3601 PGA Blvd

Suite, Apt. #, etc.
301

City & State
Palm Beach Gardens, FL

Zip 33410   Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number →
Applied For
☒ Not Applicable

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

6. Name and Address of Current Registered Agent

HARROLD, DAVID
11641 KEW GARDENS AVE., #101
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name Harrold, David W.

Street Address (P.O. Box Number is Not Acceptable)
3601 PGA Blvd
Ste 301

City Palm Beach Gardens   FL   Zip Code 33410

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)

5-2-03
DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS / **11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

	10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE	PD	☑ Change	☐ Addition
NAME	PREVOST, BRUCE		NAME	Prevost, Bruce		
STREET ADDRESS	11641 KEW GARDENS AVE., #101		STREET ADDRESS	3601 PGA Blvd, Ste 301		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410		CITY-ST-ZIP	Palm Beach Gardens, FL 33410		
TITLE	VD	☐ Delete	TITLE	VD	☑ Change	☐ Addition
NAME	HARROLD, DAVID		NAME	Harrold, David		
STREET ADDRESS	11641 KEW GARDENS AVE., #101		STREET ADDRESS	3601 PGA Blvd, Ste 301		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410		CITY-ST-ZIP	Palm Beach Gardens, FL 33410		
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 607, 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 RECEIVED   5-2-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #