## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P95000049586

Entity Name: GABLES PROPERTY MANAGEMENT, INC.

**FILED** Nov 06, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1495 NORTH PARK DRIVE WESTON, FL 33326 US	
Current Mailing Address:	New Mailing Address:
1495 NORTH PARK DRIVE WESTON, FL 33326 US	
FEI Number: 65-0605833 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
O'DONNELL, LINDA J 1495 NORTH PARK DRIVE WESTON, FL 33326 US	POFFENBARGER, MARC 1495 NORTH PARK DRIVE WESTON, FL 33326 US
The above named entity submits this statement for the pu in the State of Florida.	rpose of changing its registered office or registered agent, or both
SIGNATURE: MARC POFFENBARGER	11/06/2007
Electronic Signature of Registered Agen	nt Date

## **OFFICERS AND DIRECTORS:** PTDS

() Delete

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

PTDS

Title:

O'DONNELL, LINDA J POFFENBARGER, MARK Name: Name: 1495 NORTH PARK DRIVE Address: 1495 NORTH PARK DRIVE Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: WESTON, FL 33326 US Title: () Delete Title: (X) Change ( ) Addition STRATTON, EMILY DEUTSCH, MEGAN Name: Name: Address: Address: 1495 NORTH PARK DRIVE 1495 NORTH PARK DRIVE WESTON, FL 33326 WESTON, FL 33326 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: GRIEVE, PATRICK Name: 1495 NORTH PARK DRIVE Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: (X) Delete Title: () Change () Addition GEHRET, DANA Name: Name: 1495 NORTH PARK DRIVE Address: Address: WESTON, FL 33326 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK POFFENBARGER **PTDS** 11/06/2007