## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110321

Entity Name: GERALDINE APARTMENTS, INC.

FILED Jan 28, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Current Principal Place of Business: New Principal Place of Business:

10322 SW 144 STREET 64 NW 10 STREET, MIAMI, FL 33176 1

HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

10322 SW 144 STREET 2236 LEGACY OAK DRIVE MIAMI, FL 33176 2236 LEGACY OAK DRIVE WAXHAW, NC 28173

FEI Number: 65-0970038 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:

 LANKEN, MATTHEW R
 LANKEN, MATTHEW R

 10322 SW 144 ST
 9128 SW 129 LANE

 MIAMI, FL 33176
 US

 MIAMI, FL 33176
 US

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: 01/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete Title: Name: LANKEN, MATTHEW Name:

 Name:
 LANKEN, MATTHEW
 Name:
 LANKEN, MATTHEW

 Address:
 10322 SW 144 ST
 Address:
 2236 LEGACY OAK DRIVE

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 WAXHAW, NC 28173

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition Name: LANKEN, DEBORAH Name: LANKEN, DEBORAH

 Name:
 LANKEN, DEBORAH
 Name:
 LANKEN, DEBORAH

 Address:
 10322 SW 144 ST
 Address:
 2236 LEGACY OAK DRIVE

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 WAXHAW, NC 28173

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: MATTHEW LANKEN P 01/28/2009