

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED

DOCUMENT # **V40050** (9)

1. Corporation Name

GARDEN LAKES DEVELOPMENT CORPORATION

95 MAY 11 AM 9:28

SECTION 607.01(1), FLA. STAT.
TALLAHASSEE, FLORIDA

Principal Place of Business
**8466 N. LOCKWOOD RIDGE ROAD
SUITE 300
SARASOTA FL 34243**

Mailing Address
**8466 N. LOCKWOOD RIDGE ROAD
SUITE 300
SARASOTA FL 34243**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/01/1992** 3a. Date of Last Report **03/22/1994**

4. FEI Number **65-0338761** Applied For ☐ Not Applicable ☐

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

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

6. This corporation has liability for interjurisdictional order to 1994 Q3, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

County

25

Zip

29

County

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DESENBERG, TREY
8466 N. LOCKWOOD RIDGE ROAD
SUITE 300
SARASOTA FL 34243**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the filing requirements of Section 607.0506, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (Typed Name and Title)

Signature of New Registered Agent (Typed Name and Title)

Signature of Officer or Director

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME **D**
DESENBERG, TREY
2. STREET ADDRESS **8466 N. LOCKWOOD RIDGE**
3. CITY, STATE, ZIP **SARASOTA FL**

4. NAME
5. STREET ADDRESS
6. CITY, STATE, ZIP

7. NAME
8. STREET ADDRESS
9. CITY, STATE, ZIP

10. NAME
11. STREET ADDRESS
12. CITY, STATE, ZIP

13. NAME
14. STREET ADDRESS
15. CITY, STATE, ZIP

16. NAME
17. STREET ADDRESS
18. CITY, STATE, ZIP

19. NAME
20. STREET ADDRESS
21. CITY, STATE, ZIP

22. NAME
23. STREET ADDRESS
24. CITY, STATE, ZIP

25. NAME
26. STREET ADDRESS
27. CITY, STATE, ZIP

28. NAME
29. STREET ADDRESS
30. CITY, STATE, ZIP

31. NAME ☐ Change ☐ Addition

32. NAME ☐ Change ☐ Addition

33. NAME ☐ Change ☐ Addition

34. NAME ☐ Change ☐ Addition

35. NAME ☐ Change ☐ Addition

36. NAME ☐ Change ☐ Addition

37. NAME ☐ Change ☐ Addition

38. NAME ☐ Change ☐ Addition

39. NAME ☐ Change ☐ Addition

40. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE:

Trey Desenberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 813-727-7000