

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753461

**Entity Name:** THE GARDENS 1 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9360 SW 23RD ST.  
DAVIE, FL 33324

**Current Mailing Address:**

9360 SW 23RD ST.  
DAVIE, FL 33324

**FEI Number: 59-2058714**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FRANKS, EMILY  
2140 SW 94TH TER  
APT 203  
DAVIE, FL 33324-6805 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           TREASURER  
Name           WILSON, MICHAEL  
Address        2160 SW 93RD WAY  
                  APT 1001  
City-State-Zip: DAVIE FL 33324-6815

Title           PRESIDENT  
Name           FRANKS, EMILY  
Address        2140 SW 94TH TER  
                  APT 203  
City-State-Zip: DAVIE FL 33324-6805

Title           DIRECTOR  
Name           BABCOCK, SIS  
Address        2141 SW 93RD WAY  
                  APT 704  
City-State-Zip: DAVIE FL 33324-6812

Title           VP  
Name           PANIAGUA, ROBERT  
Address        2140 SW 93RD WAY  
                  APT 1204  
City-State-Zip: DAVIE FL 33324-6811

Title           DIRECTOR  
Name           HEGHINIAN, DONNA  
Address        2160 SW 93RD WAY  
                  APT 1003  
City-State-Zip: DAVIE FL 33324-6815

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL WILSON**

**TREASURER**

**01/29/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date