## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12796

Entity Name: THE DEAUVILLE GARDENS, INC.

inity Name: The Benovice Childento, in

**Current Principal Place of Business:** 

3212 SOUTHEAST 8TH STREET APT. A-2

POMPANO BEACH, FL 33062

**Current Mailing Address:** 

3212 SOUTHEAST 8TH STREET APT. A-2 POMPANO BEACH, FL 33062

FEI Number: 59-1090130 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORIN-BABINEAU, ANNETTE 3212 SE 8TH STREET APT. A-2 POMPANO BEACH, FL 33062 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

FILED Mar 11, 2013

**Secretary of State** 

CC1491291686

## Officer/Director Detail:

Title P	Title	VP
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Name ANDREW, PORTE Name THOMAS, JAMES

Address 3212 SE 8TH STREET, APT. A-3 Address 1 FULTON STREET

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: LUZERNE PA 18709-1498

Title S Title T

Name CARLEY, SHIRLEY Name MORIN-BABINEAU, ANNETTE

Address 3212 SE 8 STREET A-6 Address 97 GOLDENCREST AVE.

Address 3212 SE 8 STREET A-6 Address 97 GOLDENCREST AVE.

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: WALTHAM MA 02451

Title BM Title BM

NamePATERNOSTER, GILDANameMCCUEN, JOELAddress3212 SE 8TH STREET B-22Address5456 DUBLIN ROADCity-State-Zip:POMPANO BEACH FL 33062-1498City-State-Zip:DUBLIN OH 43017

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.