

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90054 006 ****61.25

DOCUMENT # 713145

1. Entity Name
GOLDEN VIEW CONDOMINIUM, INC.,

Principal Place of Business Mailing Address
3189 SOUTH OCEAN DRIVE 3189 SOUTH OCEAN DRIVE
HALLANDALE FL 33009 HALLANDALE FL 33009

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country



1st MOORE CR2E037 (10/05)

4. FEI Number **59-1229349** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
PYER, JILL
3199 SOUTH OCEAN DRIVE
SUITE E305
HALLANDALE FL 33009

7. Name and Address of New Registered Agent
 Name **PAT. PUGLIESE**
 Street Address (P.O. Box Number is Not Acceptable) **3199 S OCEAN DR. 3D1E**
 City **HALLANDALE, FL** Zip Code **33009**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Pat Pugliese* (NOTE: Registered Agent signature required when reissuing)

PAI
 CK NO | DATE
10094 2-3-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D	BRENNAN, PATRICIA 3199 S OCEAN DR 605E HALLANDALE FL 33009	TITLE SECTY Cherri BLAIR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE PD	DYER, JILL 3199 SO. OCEAN DR 305 E HALLANDALE FL 33009	TITLE VP BEVERLY ASSE 3199 S OCEAN DR. 604E HALLANDALE FL 33009	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TSD	PALELIS, JENNETTE 3199 SOUTH OCEAN DRIVE #401E HALLANDALE FL 33009	TITLE D APRIL WATKINS 3199 S OCEAN DR. 202E HALLANDALE FL 33009	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	MORIN, JACQUES 3181 50 OCEAN DR #205 W HALLANDALE FL 33009	TITLE D JEAN-CLAUDE HELLMAD 3199 S OCEAN DRIVE E603 HALLANDALE FL 33009	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE SE	PUGLIESE, PATRICIA PRESIDENT 3199 SO OCEAN DR. #301E HALLANDALE FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	DUDASH, DIANE 3181 SO OCEAN DR 206 W. HALLANDALE FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

Total of 9 Directors/officers

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 19, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Beverly Asse*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____