

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 14, 2004 8:00 am
Secretary of State

05-05-2004 90213 016 ****61.25

DOCUMENT # 719724 1. Entity Name GOLF MANOR CONDOMINIUM "A", INC.					
Principal Place of Business 14901 SW 4TH STREET APT 4 PEMBROKE PINES FL 33027			Mailing Address 14901 SW 4TH STREET PEMBROKE PINES FL 33027		
2. Principal Place of Business Suite, Apt. #, etc. 			3. Mailing Address 6001 SW 188 AVE Suite, Apt. #, etc. 		
City & State 			City & State South West Ranches		
Zip 33332		Country Droward		4. FEI Number 59-1351387	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent HERRING, JOHN JR 14901 SW 4TH ST. APT 4 PEMBROKE PINES FL 33027				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <u><i>[Signature]</i></u> T-S DATE <u>4-2-2004</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		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 NAME STREET ADDRESS CITY-ST-ZIP	P HERRING, JOHN JR 14901 SW 4TH ST. APT 4 PEMBROKE PINES FL 33027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUELSY 14901 SW 4ST A 15 PEMBROKE PINES FL 33027	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAHE, OLIVE 14901 SW 4ST A-2 PEMBROKE PINES FL 33027	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAHE ROCKY F CATMAN 14901 SW 4 ST A 11 PEMBROKE PINES FL 33027	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS GUELSY, TRIPI 14901 SW 4ST A 15 PEMBROKE PINES FL 33027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS John Herring Jr 6001 SW 188 AVE FT LAUD. FL 33332	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CATMAN, B. ROCKY F 14901 SW 4 ST. A11 PEMBROKE PINES FL 33027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIN KELVIN D 14901 SW 4 ST A 16 PEMBROKE PINES 33027	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIN, KELVIN 14901 SW 4 ST. A16 PEMBROKE PINES FL 33027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAUL CORREA 14901 SW 4ST A 13 PEMBROKE PINES FL 33027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>[Signature]</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>4-2-2004</u> Daytime Phone # <u>954-559-0000</u>		

Calla ~~dist~~

779 724

66427861

PRESIDENT

TRIP! GUELSY

14901 SW 4 ST A-15

Pembroke Pines FL 33027

V. President

ROCKY F CATMAN

14901 SW 4 ST A-11

~~Pembroke Pines FL 33027~~

TREASURE

John Herring JR

6001 SW 188 Ave

South West ranches FL

Broward co. 33332

D

KELVIN MARIN

14901 SW 4 ST A-16

Pembroke Pines FL 33027

D

RAUL CORREA

14901 SW 4 ST A-13

Pembroke Pines FL 33027