

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 01, 2006
Secretary of State**

DOCUMENT# 735308

Entity Name: GOLDEN WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1345 WEST AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

275 FONTAINE BLEAU BLVD
200
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 59-1746371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALVAREZ, NESTOR
3971 S.W. 8 ST. #209
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HADOS, NICHOLAS
Address: 1345 WEST AVENUE #1003
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP (X) Delete
Name: PELEGRIN, JORGE
Address: 1345 WEST AVE. #704
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: ARGOS, BENITA
Address: 1345 WEST AVENUE #304
City-St-Zip: MIAMI BEACH, FL 33139

Title: T (X) Delete
Name: ARGOS, BENITA
Address: 1345 WEST AVENUE #304
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: KROUZYL, NOBERTO
Address: 1345 WEST AVE. #803
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: GRAYSON, PAULA
Address: 1345 WEST AVENUE #402
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: ARGOS, BENITA
Address: 1345 WEST AVENUE #304
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GRAYSON, PAULA
Address: 1345 WEST AVENUE #402
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NICHOLAS HADOS

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date