


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

3564

Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # 735308
1. Entity Name
GOLDEN WEST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: **1345 WEST AVENUE MIAMI BEACH FL 33139**
Mailing Address: **275 FONTAINE BLEAU BLVD 200 MIAMI FL 33172 US**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

52063



1st MOORE CR2E037 (10/07)

4. FEI Number **59-1746371**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
ALVAREZ, NESTOR
3971 S.W. 8 ST. #209
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

B. 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 _____ (NOTE: By signed Agent signature is required when re-instating) DATE _____

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEVINE, SUSANA <input type="checkbox"/> Delete 1345 WEST AVENUE MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODRIGUEZ, LEONARDO <input type="checkbox"/> Delete 1345 WEST AVENUE MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SIMMONS, CONRAD <input type="checkbox"/> Delete 1345 WEST AVE. MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TORRES, JUAN <input type="checkbox"/> Delete 1345 WEST AVENUE MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENDEL, ELEANOR <input type="checkbox"/> Delete 1345 WEST AVE MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRKLAND, CORINNE <input type="checkbox"/> Delete 1345 WEST AVE. MIAMI BEACH FL 33139

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000819360 02/15/08-80079-016 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *[Signature]* SUSANA LEVINE Feb 1st, 2008