


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90034 030 ****61.25

DOCUMENT # 770315			
1. Entity Name GALT OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 3800 GALT OCEAN DRIVE FT. LAUDERDALE FL 33308		Mailing Address 3800 GALT OCEAN DRIVE FT. LAUDERDALE FL 33308	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number 59-2343612	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, ISRAEL L
3800 GALT OCEAN DRIVE
FT. LAUDERDALE FL 33308

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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: TD NAME: SHAPIRO, LEE STREET ADDRESS: 3800 GALT OCEAN DR, #103 CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE: D NAME: SHORT, MARY STREET ADDRESS: 3800 GALT OCEAN DR. #PH2 CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE: SD NAME: SIEGEL, HENRIETTA STREET ADDRESS: 3800 GALT OCEAN DR. #PH 8 CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE: PD NAME: IERACI, PIO STREET ADDRESS: 3800 GALT OCEAN DRIVE #609 CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE: VPD NAME: BENSON, JOEL STREET ADDRESS: 3800 GALT OCEAN DR. #806 CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE: TD NAME: SHORT, MARY STREET ADDRESS: 3800 GALT OCEAN DR PHZ CITY-ST-ZIP: FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: _____ NAME: MARTIN FRIEDMAN #910 STREET ADDRESS: 3800 GALT OCEAN DRIVE CITY-ST-ZIP: FT. LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: Joseph Scifani STREET ADDRESS: 3800 GALT OCEAN DRIVE #1210 CITY-ST-ZIP: FT. LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: MARY SHAPIRO STREET ADDRESS: 3800 GALT OCEAN DRIVE CITY-ST-ZIP: FT. LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: ELIZABETH BIANCO STREET ADDRESS: 3800 GALT OCEAN DRIVE CITY-ST-ZIP: FT. LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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 reports 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: _____ **PRESIDENT** **3/8/07** **954-347-5500**