2003 NOT-FOR-PROFIT CORPOR UNIFORM BUSINESS REPORT	ATION (UBR)
DOCUMENT # N11937  1. Entity Name	
GOLFSIDE VILLAGE CONDOMINIUM ASSOCIATION OF LEHI	

## FILED Jul 17, 2003 8:00 am Secretary of State 07-17-2003 90038 033 \*\*\*\*61.25

GOLFSIDI GH ACRE	E VILLAGE CONDOMINIUM AS S, INC.	SOCIATION OF LEHI			07	17-2003 90038	8 033 **** 01.2	23
Principal Plac	ce of Business	Mailing Address						
801"LEELAND LEHIGH ACRES US	HEIGHT'S BLVD S FL 33936	P.O. BOX 105 LEHIGH ACRES FL 33970 US				IK <b>rit (Bika</b> inin i <b>tr</b> i it		
2. Principal F	Place of Business	3. Mailing Address	- ^ -					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				ECK HERE IF MA	KING CHANGES	
City & Stat	te	City & State		-	4. FEI Number 65-(	0098010	No	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of State		Fee Hequire	
- 111	6. Name and Address of Current R	legistered Agent	Name		7. Name and Addre	ss of New Registe	ered Agent	
DEVMO	DC A B							
	NOLDS AND ASSO		Street A	Street Address (P.O. Box f		Acceptable)	··	
	AND HEIGHTS BLVD							}
·	ACRES FL 33936		City				FL Zip Cod	J
	named entity submits this statement for tions of registered agent.	the purpose of changing its re	gistered office o	r registere	ed agent, or both, in the	State of Florida.	l am familiar with,	and accept
								]
SIGNATURE	<u> </u>							\
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: F	Registered Agent signa	ture required v	when reinstating)		DATE	
		9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees		heck Payable epartment of S	
	tember 10, 2003, min will be \$23 OFFICERS AND DIRE	6.25 Trust Fund Cor		<u>.                                    </u>		Florida De	epartment of S	State
After Sept	OFFICERS AND DIRE	6.25 Trust Fund Cor	11.	<u>.                                    </u>	Added to Fees	Florida De	epartment of S	State
After Sept  10.  TITLE  NAME	OFFICERS AND DIRE PD KRAUSE, CHARLES	66.25 Trust Fund Cor	TITLE NAME	<u>.                                    </u>	Added to Fees	Florida De	epartment of S	State
After Sept	OFFICERS AND DIRE	66.25 Trust Fund Cor	11.	<u>.                                    </u>	Added to Fees	Florida De	epartment of S	State
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIRE  OFFICERS AND DIRE  PD  KRAUSE, CHARLES  2029 GOLFSIDE VILLAGE DR  LEHIGH ACRES FL 33972  VD	66.25 Trust Fund Cor	11. TITLE NAME STREET ADDRESS	<u>.                                    </u>	Added to Fees	Florida De	epartment of S	State
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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:

7-10-03