2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49280

FILED Feb 19, 2009 Secretary of State

Entity Name: GOLDEN ACRES RO ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685

Current Mailing Address: New Mailing Address:

4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685

FEI Number: 59-3129341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REARDON, MAUREEN C 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition PERRY, PATRICIA MICKLE, ROBERT Name: Name: 1040 MAIN STREET #11 Address: 1040 MAIN STREET #29 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: Title: () Change () Addition

() Delete COLLETT, DOUGLAS D Name: Name: Address: 1040 MAIN ST. #109 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip:

Title: () Delete Title: () Change () Addition

LACROIX, RAYMOND Name: Name: Address: 1040 MAIN ST., #166 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip:

() Delete Title: Title: () Change () Addition

FITZPATRICK, JUDITH Name: Name: 1040 MAIN STREET, #87 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip:

Title: PRE () Delete Title: (X) Change () Addition

LAMOUREUX, RAYMOND LAMOUREUX, RAYMOND Name: Name: 1040 MAIN STREET #9 1040 MAIN STREET #9 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: () Delete Title: (X) Change () Addition

ECKLAND, ROBERT TASIOR, RON Name: Name: Address: 1040 MAIN ST #168 Address: 1040 MAIN ST #42 DUNEDIN, FL 34698 DUNEDIN, FL 34698 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RAYMOND LAMOUREUX **PRES** 02/19/2009