

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000822

**Entity Name:** GOLDEN BAY CLUB CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 31, 2016**  
**Secretary of State**  
**CC2111386535**

**Current Principal Place of Business:**

17050 N BAY RD  
OFFICE  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

17050 N BAY RD  
OFFICE  
SUNNY ISLES BEACH, FL 33160

**FEI Number: 34-2014820**

**Certificate of Status Desired: No**

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

ROSE, MURRAY AGENT  
9600 N.W. 25 STREET  
SUITE 5-D  
DORAL, FL 33172 US

*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

**Officer/Director Detail :**

Title PD  
Name PATRY, JEAN  
Address 17050 N. BAY RD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title D  
Name BUSTAMANTE, WILLIAM  
Address 17050 N. BAY RD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title VP  
Name LIBSFRANT, PATRICIA  
Address 17050 N. BAY RD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title TREASURER  
Name HUDON, HELENE  
Address 17050 NORTH BAY ROAD,  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title SECRETARY  
Name WICKMAN, SILVIA  
Address 17050 BAY ROAD  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*I hereby 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 all other like empowered.*

**SIGNATURE: JEAN PATRY**

**PRESIDENT**

**03/31/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date