
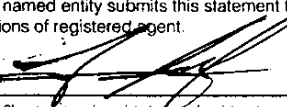
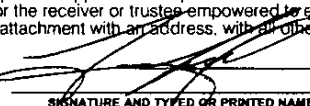


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State

01-14-2008 90093 015 ****61.25

DOCUMENT # 718052 1. Entity Name GOLDEN SURF TOWERS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 137 GOLDEN ISLES DRIVE OFFICE HALLANDALE, FL 33009			Mailing Address 137 GOLDEN ISLES DRIVE OFFICE HALLANDALE, FL 33009		
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	4. FEI Number 59-1396354	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PECHOVA, MARTA 137 GOLDEN ISLES DRIVE, UNIT 906 HALLANDALE, FL 33009				7. Name and Address of New Registered Agent Name FRANCISCO HERNANDEZ Street Address (P.O. Box Number is Not Acceptable) 137 Golden Isles Drive #1012 City HALLANDALE FL Zip Code 33009	
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  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE 1/9/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	TREASURER <input type="checkbox"/> Delete PECHOVA, MARTA 137 GOLDEN ISLES DRIVE, APT 906 HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR <input type="checkbox"/> Delete BURNSTEIN, PHIL 137 GOLDEN ISLES DRIVE, APT 1607 HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP <input type="checkbox"/> Delete MACHADO, JESUS 137 GOLDEN ISLES DRIVE, APT 1601 HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR <input type="checkbox"/> Delete HOLTMAN, RON 137 GOLDEN ISLES DRIVE, APT 1207 HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT <input type="checkbox"/> Delete HERNANDEZ, FRANCISCO 137 GOLDEN ISLES DRIVE, APT 1012 HALLANDALE, FL 33009				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete KILJIAN, HILD 137 GOLDEN ISLES DRIVE, APT 307 HALLANDALE, FL 33009				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ANDREY, MARIA 137 Golden Isles DR, apt 701 HALLANDALE, FL 33009				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date				Daytime Phone #	