

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718983

FILED
Jan 19, 2009
Secretary of State

Entity Name: GOLFWOOD CONDOMINIUM NO. 2, INC.

Current Principal Place of Business:

361 WESTPARK RD.
LEHIGH ACRES, FL 33972 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 655
LEHIGH ACRES, FL 339700655 US

New Mailing Address:

FEI Number: 59-1446734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREATHY, RALPH E
361 WESTPARK RD.
LEHIGH ACRES, FL 33972 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SWITZER, GEORGE II
Address: 301 MAYCREST RD.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: PD () Delete
Name: FRENCH, CARL
Address: 349 RICHLAND RD
City-St-Zip: LEIGH ACRES, FL 33972

Title: TD () Delete
Name: FREATHY, RALPH
Address: 361 WESTPARK RD
City-St-Zip: LEHIGH ACRES, FL

Title: VPD () Delete
Name: KELLEY, EDWIN
Address: 311 MAYCREAST RD
City-St-Zip: LEHIGH ACRES, FL 33972

Title: SD () Delete
Name: MENDENHALL, ALICE
Address: 307 MAYCREST RD
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RALPH FREATHY

TREA

01/19/2009

Electronic Signature of Signing Officer or Director

Date