## 2006 NOT-FOR-PROFIT CORPORATION

## FILED Mar 24, 2006 8:00 am Secretary of State 03-24-2006 90029 027 \*\*\*\*61.25

ANNUAL REPORT (AR)	
DOCUMENT # 722216	A ST

1. Entity Name

GOLDEN ARROW CONDOMINIUM ASSOCIATION, INC.



			1000	100				
Principal Placi	e of Business	Mailing Address		· .	<b>7 ~ ~</b>			
299 SW 7TH ST BOCA RATON FL 33432-5948 US		299 S.W. 7TH STREET BOCA RATON FL 33432-5948						
2. Principal P	lace of Business	3. Mailing Address				AISH SEEN EISH EISH EISH	<b>                                   </b>	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		دمو	1st MOORE CF	R2E037 (10/05)		
City & State		City & State			4. FEI Number Applied For Not Applicable			
Zíp	POLINA SERVICE	Zip	Country		5. Certificate of Status Desired	S8.75 Add		
	6. Name and Address of Current R	legistered Agent			7. Name and Address of New Reg	istered Agent		
			Name				-	
MADER, GERALD J 298 SW 6TH ST			Street Address		(P.O. Box Number is Not Acceptable)			
BOC	A RATON FL 33432	·			•			
	,		City			FL Zip Code	2	
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	gistered office o	r registere	ed agent, or both, in the State of Florid	la. I am familiar with,	and accept	
	,	9	1	/	$\gamma \mathcal{A}$		-	
SIGNATURE.	GERALD J. MADE! Signaturo, typica or printed name of receivance agent as	no tric if appropries (NOTE: F	iogistered Agent signal	партукания	L Maler	3\13\0	<u> </u>	
FILE NOW: FEE IS \$61.25  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees Florida Department of State								
10.	OFFICERS AND DIR	ECTORS	11.	Д	DDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN	10	
TITLE	P	□ Delete .	TITLE			☐ Change	Addition	
NAME	MADER, GERALD J		NAME					
STREET ADDRESS CITY-ST-ZIP	298 SW 6TH ST BOCA RATON FL 33432		STREET ADDRESS CITY-ST-ZIP	1			!	
-	VP	<b>2</b> 0	<del>]</del>		<del></del>	- Chross	DD Addition	
TITLE	LEONE, JAMES	<b>⊠</b> Detete	TITLE NAME	VP	LIAM BRUSH	<b>X</b> Change	Addition	
STREET ADDRESS	298 SW 6THST		STREET ADDRESS	198	LIAM BRUSH 5.W 6TH ST.			
CITY-ST-ZIP	BOCA RATON FL 33432	*	CITY-ST-ZIP		A BATON FL. 334	32		
fifte	TD	☐ ∪elete	TITLE			☐ Change	☐ Addition	
NAME	CAMPBELL, MARY 298 SW 6TH ST		NAME TOOREGE					
STREET ADDRESS CITY-ST-71P	BOCA RATON FL 33432		STREET ADDRESS CITY-ST-ZIP					
TITLE	S	Delete	TITLE	<u>_</u>		<b>∑</b> Change	2 Addition	
NAME	SLAVK, BETSY A	MAD DEROLE	NAME	5 4	s F. BOLIVAR	( Crisings	Egy Manney	
STREET ADDRESS	298 SW 6THS T	,	STREET ADDRESS	298	S.W 6THST.			
CITY+ST-ZIP	BOCA RATON FL 33432		CITY - ST - ZIP	Boc	A RATON, FL. 334	32		
TITLE		☐ Delete	TITLE	$\mathcal{D}$	•	<b>□</b> Change	Addition	
NAME			NAME	JAY	nes Leone			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	298	S.W 6TH ST.			
<del></del>		□ <b>*</b>	<del> </del>	150C	ABATON, FL334		Addition	
TITLE NAME		☐ Delete	TITLE NAME	1		Change	Accition	
STREET ADDRESS			STREET ADDRESS	1		-		
CITY-ST-ZIP			CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

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Many Company Studial

(561) 361-2810