

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 01, 2006 8:00 am
Secretary of State

04-07-2006 90044 032 ****61.25

DOCUMENT # 725842

1. Entity Name

GOLF VIEW CLUB OF GULF STREAM, INC.



Principal Place of Business
3883 GULFSTREAM ROAD
GULFSTREAM FL 33483
US

Mailing Address
P O BOX 1132
BOYNTON BEACH FL 33425-132
US



2. Principal Place of Business

3. Mailing Address

3883 GULF STREAM Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

GULF STREAM FLORIDA

4. FEI Number

59-1450701

Applied For

Not Applicable

Zip

Country

Zip

33483

Country

PALM BEACH

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, ERIC
1171 NORTH OCEAN BLVD - OFFICE
GULFSTREAM FL 33483

delete

7. Name and Address of New Registered Agent

Name RUSSELL OTTOUCHITS PRESIDENT ASSOC.

Street Address (P.O. Box Number is Not Acceptable)
3883 GULF STREAM Rd

3 - SOUTH 1 - NORTH

City GULF STREAM

FL

Zip Code

33483

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

[Signature]

February 9 2006

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WILLIAMSON, ERIC
STREET ADDRESS 3883 GULFSTREAM ROAD
CITY-ST-ZIP GULFSTREAM FL 33483 ☒ Delete

TITLE T
NAME HOWARD, SANDY
STREET ADDRESS 3883 GULFSTREAM ROAD
CITY-ST-ZIP GULFSTREAM FL 33483 ☐ Delete

TITLE S
NAME ~~JOHN CALDWELL~~
STREET ADDRESS 3883 GULFSTREAM RD
CITY-ST-ZIP GULFSTREAM FL 33483 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME RUSSELL OTTOUCHITS ☐ Change ☒ Addition
STREET ADDRESS 3883 GULF STREAM Rd # 1-N
CITY-ST-ZIP GULF STREAM FL 33483

TITLE T
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ~~JOHN CALDWELL~~
STREET ADDRESS 3883 GULF STREAM Rd # 4-S
CITY-ST-ZIP GULF STREAM FL 33483 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 supplement 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 trustees 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-06 561-676-6976