

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90044 001 ****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

3883 GULFSTREAM ROAD
GULFSTREAM FL 33483
US



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

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1450701

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OTOWICHIS, RUSSELL
3883 GULF STREAM RD
1-NORTH
GULF STREAM FL 33483

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
PD	OTOWCHITS, RUSSELL	3883 GULF STREAM RD 1-NORTH	GULFSTREAM FL 33483	
T	HOWARD, SANDY	3883 GULFSTREAM ROAD	GULFSTREAM FL 33483	<input type="checkbox"/> Delete
S	TRIAINT, GEORGE	3883 GULF STREAM RD 4-S	GULFSTREAM FL 33483	<input checked="" type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
TREASURER	HOWARD, SANDI B.	3883 GULF STREAM RD 4-NORTH	GULF STREAM, FL 33483		
PD	ORIN LITTLEJOHN	3883 GULF STREAM RD 2-S	GULF STREAM, FL 33483	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
S	HAYES, LISA	3883 GULF STREAM RD 3-N	GULF STREAM, FL 33483	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> 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 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: Sandi B. Howard, Treasurer SANDI B. HOWARD 3/26/08 561-278-1955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #