

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734853

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** GOLF RIDGE VILLAS CONDOMINIUM UNIT E, INC.

**Current Principal Place of Business:**

20600 NW 7TH AVE  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

20600 NW 7TH AVE  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

**FEI Number:** 65-0133843

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NWAMAH, EMMANUEL  
20600 NW 7TH AVENUE  
APT 106  
MIAMI, FL 33169 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: T ( ) Delete  
Name: CONNER, GERALDINE  
Address: 20600 NW 7TH AVE #105  
City-St-Zip: MIAMI, FL 33169

Title: V ( ) Delete  
Name: MEREJILDO, GEORGE  
Address: 20600 NW 7 AVE # 104  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: PEART, KIMBERLEY  
Address: 20600 NW 7TH AVE #101  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: CHARLES-HARRIS, MURIEL  
Address: 20600 NW 7TH AVENUE #206  
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete  
Name: MARTE, ALEIDA  
Address: 20600 NW 7TH AVENUE #201  
City-St-Zip: MIAMI, FL 33169

**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: GERALDINE CONNER

T

04/15/2009

Electronic Signature of Signing Officer or Director

Date