


**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90001 038 \*\*\*\*61.25

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # 743055</b> 1. Entity Name <b>GOLDEN LAKES PLAZA PROPERTY OWNERS          ASSOCIATION, INC.</b>					
Principal Place of Business <b>2200 NW 2 AVE STE 220          BOCA RATON, FL 33431</b>			Mailing Address <b>2200 NW 2 AVE STE 220          BOCA RATON, FL 33431</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip		City & State  Zip		4. FEI Number <b>65-0897290</b> Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional          Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>HEISE, MARTIN P          2200 NW 2 AVE STE 220          BOCA RATON, FL 33431</b>				7. Name and Address of New Registered Agent Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee Is \$61.25          Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be          Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>SANSBURY, JOHN</b> <b>303M SERV. LLO, 1700 EMBASSY DR. STE. 107</b> <b>WEST PALM BEACH, FL 33401</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>Martin Heise</b> <b>2200 NW Boca Raton Blvd, Suite 220</b> <b>BOCA RATON, FL 33431</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>HEISE, MARTIN P - 2200 NW 2 Ave, Ste 220</b> <b>947 CLINT MOORE - Boca Raton, FL 33431</b> <b>BOCA RATON, FL</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Joe Vassallo</b> <b>303 Banyan Blvd, Suite 101</b> <b>W. Palm Beach, FL 33401</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HULETT, TIMOTHY</b> <b>C/O HULETT ENVIRO. 1959 W. 9TH ST.</b> <b>RIVIERA BEACH, FL 33404</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	    	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SIMPSON, ROBERT</b> <b>C/O PALM BEACH MOTORS, 915 S. DIX. HWY.</b> <b>WEST PALM BEACH, FL 33401</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	    	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>KOGGE, KEVIN B</b> <b>C/O WACHOVIA, 225 WATER ST., 4TH FL.</b> <b>JACKSONVILLE, FL 32202</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Harold Murphy</b> <b>13245 Compton Rd</b> <b>Loxahatchee, FL 33470</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	    		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BB+T</b> <b>2825 Reynolda Rd</b> <b>Winston-Salem, NC 27106</b>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Martin Heise</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>3/25/08</b> Daytime Phone # <b>561 997 0045</b>		