

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744443

**FILED**  
**Feb 05, 2010**  
**Secretary of State**

**Entity Name:** GOLF VIEW MANOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5515 RATTLESNAKE HAMMOCK ROAD  
105  
NAPLES, FL 34113 US

**New Principal Place of Business:**

**Current Mailing Address:**

5515 RATTLESNAKE HAMMOCK ROAD  
105  
NAPLES, FL 34113 US

**New Mailing Address:**

**FEI Number:** 59-2125937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAPOTON, FRANCIS J  
5515 RATTLESNAKE HAMMOCK ROAD  
105  
NAPLES, FL 34113 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: PD  
Name: CROWLEY, RICHARD  
Address: 5 KATHLEEN DR  
City-St-Zip: FRANKLIN, MA 02038

Title: VPD  
Name: PARA, CASIMIR  
Address: 5515 RATTLESNAKE HAMMOCK RD  
City-St-Zip: NAPLES, FL 34113

Title: STD  
Name: CHAPOTON, FRANCIS  
Address: 5515 RATTLESNAKE HAMMOCK ROAD  
City-St-Zip: NAPLES, FL 34113

Title: VPD  
Name: SUNTER, HELEN  
Address: 5515 RATTLESNAKE HAMMOCK ROAD  
City-St-Zip: NAPLES, FL 34113

Title: VPD  
Name: DAVIS, MILTON  
Address: 5515 RATTLESNAKE HAMMOCK ROAD 312  
City-St-Zip: NAPLES, FL 34113

I hereby 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 all other like empowered.

SIGNATURE: FRANK CHAPATON

SEC

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date