2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745793

FILED Apr 13, 2005 Secretary of State

Entity Name: GOLFVIEW TOWNHOUSES CONDOMINIUM PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8701 N.W. 35TH STREET 8709 N.W. 35TH STREET CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

8701 N.W. 35TH STREET 8713 N.W. 35TH STREET CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065

FEI Number: 65-1157678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GAJUS, WILLIAM T

8701 N.W. 35TH STREET

CORAL SPRINGS, FL 33065

US

DARMAN, HARRY

8709 N.W. 35TH STREET

CORAL SPRINGS, FL 33065

US

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: HARRY DARMAN 04/13/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: () Change () Addition

 Name:
 DARMAN, HARRY
 Name:

 Address:
 8709 NW 35TH STREET
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:

Title: TSD () Delete Title: TSD (X) Change () Addition Name: GAJUS, WILLIAM T Name: SMITH, LAURA L

 Address:
 8701 NW 35TH STREET
 Address:
 8713 NW 35TH STREET

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: D () Delete Title: () Change () Addition

 Name:
 FRANCOIS, GENE
 Name:

 Address:
 8715 NW 35TH STREET
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAURA L SMITH TSD 04/13/2005