

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747860

FILED
Apr 17, 2009
Secretary of State

Entity Name: GOLF RESORT VILLAS MANAGEMENT, INC.

Current Principal Place of Business:

4044 GOLFSIDE DR.
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

4044 GOLFSIDE DR.
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 39-0993859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, SANDRA J
4044 GOLFSIDE DR.
ORLANDO, FL 32808 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: TD () Delete
Name: LEVY, SANDRA
Address: 4044 GOLFSIDE DR.
City-St-Zip: ORLANDO, FL 32808 US

Title: D () Delete
Name: HEATH, RICHARD
Address: 4032 GOLFSIDE DRIVE
City-St-Zip: ORLANDO, FL 32808 US

Title: SD () Delete
Name: DANIELS, KRISTI
Address: 4035 GOLFSIDE DR
City-St-Zip: ORLANDO, FL 32808 US

Title: D () Delete
Name: BRIDGET, NOEL
Address: 4046 GOLFSIDE DR
City-St-Zip: ORLANDO, FL 32808 US

Title: P () Delete
Name: SUSSI, JOHN
Address: 4001 GOLFSIDE DR
City-St-Zip: ORLANDO, FL 32808 US

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: D (X) Change () Addition
Name: MISURACA, MAUREEN
Address: 4048 GOLFSIDE DR
City-St-Zip: ORLANDO, FL 32808 US

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: SANDRA J LEVY

TD

04/17/2009

Electronic Signature of Signing Officer or Director

Date