

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90031 030 ****61.25

DOCUMENT # 750398

1. Entity Name
GOLF VIEW VILLAS CONDOMINIUM, INC.



Principal Place of Business
**19706 SW 83RD PLACE ROAD
B-9
DUNNELLO, FL 34432 US**

Mailing Address
**PO BOX 2383
DUNNELLO, FL 34430 US**

40015596



2. Principal Place of Business
19660 SW 83rd PLACE RD
Suite, Apt. #, etc.
Property Owners Assoc. Office
City & State
DUNNELLO FL
Zip
34432 Country
US

3. Mailing Address
19660 SW 83rd PLACE RD
Suite, Apt. #, etc.
Property Owners Assoc. Office
City & State
DUNNELLO FL
Zip
34432 Country
US

02042005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2087159 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**PACKER, ROBERT G
19660 SW 73RD PL RD
C-17
DUNNELLO, FL 34432**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number Not Acceptable)
19660 SW 83rd PL RD
City
FL 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees** **Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD PACKER, JANE N 19660 SW 83RD PL RD C-17 DUNNELLO, FL 34432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PACKER, HARRIETJANE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMEAD, JEAN 19706 SW 83RD PL RD B9 DUNNELLO, FL 34432 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PERRY, WILLIAM 19660 SW 83rd PLACE RD DUNNELLO, FL 34432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ELSTERMANN, HARRY 19660 SW 83RD PL RD C-15 DUNNELLO, FL 34432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERWOOD, HAZEL 19660 SW 83RD PL RD #C16 DUNNELLO, FL 34432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEAN, CHARLES 19906 SW 83 PL RD B11 DUNNELLO, FL 34432 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIUCCIO, JOHN 19405 SW 191st TERRACE DUNNELLO, FL 34432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PERRINO, NANCY 19660 SW 83RD PL RD C-20 DUNNELLO, FL 34432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: **HARRIETJANE PACKER** **2/5/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #