2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2008
Secretary of State

DOCUMENT# 750398

Entity Name: GOLF VIEW VILLAS CONDOMINIUM, INC.

Current Principal Place of Business:

19660 SW 83RD PLACE RD
PROPERTY OWNERS ASSOC OFFICE
DUNNELLON, FL 34432 US

New Principal Place of Business:

Current Mailing Address:

19660 SW 83RD PLACE RD
PROPERTY OWNERS ASSOC OFFICE
DUNNELLON, FL 34432 US

New Mailing Address:

FEI Number: 59-2087159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HELLGREN, CHERYL
19660 SW 83RD PL RD
BOX 4
DUNNELLON, FL 34432 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	( ) Delete
Name:	NEWMAN, DONALD	
Address:	19660 SW 83RD PL RD C-18	
City-St-Zip:	DUNNELLON, FL 34432 US	
Title:	VD	( ) Delete
Name:	PERRY, WILLIAM A	
Address:	19660 SW 83RD PL RD C-13	
City-St-Zip:	DUNNELLON, FL 34432 US	
Title:	SD	( ) Delete
Name:	BRODY, JEFFREY	
Address:	19467 SW 100TH LOOP	
City-St-Zip:	DUNNELLON, FL 34432 US	
Title:	TD	( ) Delete
Name:	SEIBT, RONALD	
Address:	9414 SW 191ST STREET TERRACE	
City-St-Zip:	DUNNELLON, FL 34432 US	
Title:	D	( ) Delete
Name:	EARLY, RICHARD	
Address:	1185 41ST AVE NE	
City-St-Zip:	ST PETERSBURG, FL 33703 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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: CHERYL HELLGREN AGEN 06/23/2008
Electronic Signature of Signing Officer or Director — Date