

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752393

FILED  
Jan 17, 2008  
Secretary of State

**Entity Name:** GOLFWOOD OF THE CALIFORNIA CLUB HOMEOWNERS ASSOCIATION III, INC.

**Current Principal Place of Business:**

UNIFIED PROPERTY SERVICES, INC  
1303 NORTH STATE ROAD 7 B-1  
MARGATE, FL 33063 US

**New Principal Place of Business:**

**Current Mailing Address:**

UNIFIED PROPERTY SERVICES, INC  
P.O. BOX 8290  
CORAL SPRINGS, FL 33075 US

**New Mailing Address:**

**FEI Number:** 59-2066090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIELLO, SAMUEL J JR  
1303 NORTH STATE ROAD 7  
SUITE B-1  
MARGATE, FL 33063 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: ALBA, DUCCI  
Address: 20612 NE 6TH CT  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: VPD ( ) Delete  
Name: GREEN, CHRISTINE  
Address: 20610 NE 6TH CT  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: SD ( ) Delete  
Name: MENDEZ, CHRISELIDE  
Address: 20592 NE 6TH CT  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: PD ( ) Delete  
Name: NOVAK, ROBERT  
Address: 20584 NE 6TH CT  
City-St-Zip: MIAMI, FL 33179

**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:

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: ROBERT NOVAK

PRES

01/17/2008

Electronic Signature of Signing Officer or Director

Date