## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#753819** 

FILED Mar 28, 2011 Secretary of State

Entity Name: GOLDEN RAINTREE II HOMEOWNERS' ASSOCIATION, INC.

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

C/O TRANSCONTINENTAL MGMT. 1323 LYONS ROAD COCONUT CREEK, FL 33063 US

Current Mailing Address: New Mailing Address:

C/O TRANSCONTINENTAL MGMT. 1323 LYONS ROAD COCONUT CREEK, FL 33063 US

FEI Number: 59-2045840 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:

CHAPNICK, MICHAEL E ESQ VALANCY, STEVEN S PA
100 EAST LINTON BLVD 311 SE 13TH STREET
STE 502-B FT. LAUDERDALE, FL 33316 US
DELRAY BEACH, FL 33483 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: STEVEN VALANCY 03/28/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: STEVENS, DONALD J
Address: 2059 NW 45TH AVE

City-St-Zip: COCONUT CREEK, FL 33066

Title: TD

 Name:
 MANGINI, WILLIAM

 Address:
 2025 NW 45 AVE

 City-St-Zip:
 COCONUT CREEK, FL 33066

Title: SD

Name: ROSENBERG, NORMA Address: 2027 NW 45 AVE

City-St-Zip: COCONUT CREEK, FL 33066

Title: VPD

Name: STEVENS, DONNA Address: 2059 NW 45 AVE

City-St-Zip: COCONUT CREEK, FL 33066

Title: [

Name: AURIEMMA, AMY Address: 2119 NW 45 AVE

City-St-Zip: COCONUT CREEK, FL 33066

I hereby 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 all other like empowered.

SIGNATURE: DON STEVENS PRES 03/28/2011