

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754532

FILED  
Apr 03, 2008  
Secretary of State

Entity Name: GOLF VIEW DRIVE ASSOCIATION, INC.

## Current Principal Place of Business:

10221 EMERALD COAST PKWY WEST  
SUITE 23  
MIRAMAR BEACH, FL 32550 US

## New Principal Place of Business:

## Current Mailing Address:

10221 EMERALD COAST PKWY WEST  
SUITE 23  
MIRAMAR BEACH, FL 32550 US

## New Mailing Address:

FEI Number: 59-2133461      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GELDER, JAY B  
10221 EMERALD COAST PKWY WEST  
SUITE 23  
MIRAMAR A BEACH, FL 32250 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: CHERNOVETZ, DOUG  
Address: 379 GOLF VIEW DR  
City-St-Zip: SANDESTIN, FL 32550 US

Title: D ( ) Delete  
Name: ULLRICH, DON  
Address: 381 GOLF VIEW DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: VPD ( ) Delete  
Name: MILLER, GARRETT  
Address: 372 GOLF VIEW DRIVE  
City-St-Zip: SANDESTIN, FL 32550 US

Title: TD ( ) Delete  
Name: HAYNES, BILL  
Address: 376 GOLF VIEW DRIVE  
City-St-Zip: SANDESTIN, FL 32550

Title: SD ( ) Delete  
Name: ELKINS, RODNEY  
Address: 365 GOLF VIEW DRIVE  
City-St-Zip: SANDESTIN, FL 32550

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: VAUGHN, DENNIS  
Address: 25 FRONT STREET  
City-St-Zip: MADISON, AL 35758 US

Title: DVP (X) Change ( ) Addition  
Name: ULLRICH, DON  
Address: 381 GOLF VIEW DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: PD (X) Change ( ) Addition  
Name: MILLER, GARRETT  
Address: 372 GOLF VIEW DRIVE  
City-St-Zip: SANDESTIN, FL 32550 US

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: GARRETT MILLER

PD

04/03/2008

Electronic Signature of Signing Officer or Director

Date