

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90380 011 ****61.25

DOCUMENT # 755383

1. Entity Name
GOLF LAKE VILLAS ASSOCIATION, INC.



Principal Place of Business
**1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994**

Mailing Address
**1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994**

60023016



02212006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2433944		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
CORNETT, JANE L. WACKEEN, CORNETT & GOOGE, P.A. 401 EAST OSCEOLA STREET STUART, FL 34994				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

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, 2006**

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	VPD	☐ Delete		TITLE	PD	☒ Change ☐ Addition	
NAME	DAVIS, JOE			NAME			
STREET ADDRESS	5779 DEER RUN DR 3-E			STREET ADDRESS			
CITY-ST-ZIP	FORT PIERCE, FL 34951			CITY-ST-ZIP			
TITLE	PD	☒ Delete		TITLE	VPD	☐ Change ☒ Addition	
NAME	BURKOSKI, AL			NAME	NESELECKE, KATHIE		
STREET ADDRESS	5701 DEER RUN DR			STREET ADDRESS	5707 Deer Run Dr. # 4-H		
CITY-ST-ZIP	FT PIERCE, FL			CITY-ST-ZIP	FT PIERCE, FL 34951		
TITLE	TD	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	HOUGH, JAMES			NAME			
STREET ADDRESS	5749 DEER RUN DRIVE			STREET ADDRESS			
CITY-ST-ZIP	FORT PIERCE, FL 34951			CITY-ST-ZIP			
TITLE	SD	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	NOVAK, VERA			NAME			
STREET ADDRESS	5201 DEER RUN DR 4-A			STREET ADDRESS			
CITY-ST-ZIP	FORT PIERCE, FL 34951			CITY-ST-ZIP			
TITLE	D	☒ Delete		TITLE	D	☐ Change ☒ Addition	
NAME	MCCANN, JIM			NAME	MENDILLO, John		
STREET ADDRESS	5731 DEER RUN DR 2-N			STREET ADDRESS	5283 Deer Run Dr. # 4-F		
CITY-ST-ZIP	FORT PIERCE, FL 34951			CITY-ST-ZIP	FT. PIERCE, FL 34951		
TITLE		☐ Delete		TITLE		☐ Change ☐ Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

James D. Davis PAES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-06

Date

Daytime Phone #