2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 8:00 am Secretary of State 04-27-2006 90190 027 ****61.25

DOCUMENT # 755721 1. Entity Name GOLF VIEW HARBOUR ESTATES INC.					,4-27-2000 <i>3</i> 0	0190 027 0	1.23
Principal Place of Business 1477 SW 25TH PL BOYNTON BEACH, FL 33426 US Mailing Address 322 NE 3RD STREET BOYNTON BEACH, FL 33436		5 US	400	166640			
2. Principal Place of Business		3. Mailing Address 3.4 NE 3rd Street					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02142006 Cr	ng-NP (CR2E037 (11/05)	
City & State		City & State Bounton Beach, FL		4. FEI Number 59-212108	3	 	plied For t Applicable
Zip	Country	Zip (Country USA	5. Certificate of St.	atus Desired	\$8.75 Add	litional
	6. Name and Address of Current			7. Name and Add	ress of New Reg	istered Agent	
CAPLAN, LOU 301 YAMATO ROAD SUITE 4150 BOCA RATON, FL 33431				Name Street Address (P.O. Box Number is Not Acceptable)			
			City			FL Zip Cod	9
	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent		<u></u>	egistered agent, or both, in	the State of Florid	da. I am familiar with,	and accept
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign F Trust Fund Contributi			n Financing	\$5.00 May Be		e check payable to	
				Added to rees			ate
10	OFFICERS AND DIS	PECTORS		7,0000 10 1 000	ES TO OFFICERS		<u> </u>
TITLE NAME STREET ADDRESS CITY-SJ-ZIP	OFFICERS AND DII PD BROWN, GREG 1446C SW 25TH AVENUE BOYNTON BCH, FL 33426	☐ Delete	TITLE E	ADDITIONS/CHANGE Scobar, Pedro 456 Sw 254	ave #A		<u> </u>
TITLE NAME STREET ADDRESS	PD BROWN, GREG 1446C SW 25TH AVENUE	☐ Delete	TITLE ENAME STREET ADDRESS CITY-ST-ZIP ETITLE	ADDITIONS/CHANG	2 ave # A = C 33426	AND DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD BROWN, GREG 1446C SW 25TH AVENUE BOYNTON BCH, FL 33426 STD GRUENEWALD, RALPH 1426 SW 25TH AVE	☐ Delete ☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME B STREET ADDRESS	ADDITIONS/CHANGI SECOBAR, PEDRO 456 SW 254 Boynton Beach, F 1PD Muchewald, Ralp Morsos, Lynda 432 SW 2644	2 ave #A = C 33426	AND DIRECTORS IN	10 MAddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD BROWN, GREG 1446C SW 25TH AVENUE BOYNTON BCH, FL 33426 STD GRUENEWALD, RALPH 1426 SW 25TH AVE BOYNTON BEACH, FL 33426 D SCHERER, VERNON 1443 E SW 27TH AVE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE TO NAME STREET ADDRESS CITY-ST-ZIP TO STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE Escobar, Pedro 456 SW 254 Boynton Beach, F 1PD muchewald, Raly borsos, Lynda 432 SW 264 Boynton Beach, 1 Boynton Beach, 1 Christon, Robe 432 SW 264 Boynton Beach, 1	2 ave #A = C 33426 Th Ave #C = C 33426 EC 33426 EC 33426	AND DIRECTORS IN Change	10 Addition Addition
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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: __

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-06

635-2627

Daytime Phone #