

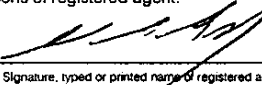
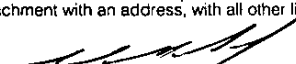


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90494 010 ****61.25

DOCUMENT # 758457					
1. Entity Name THE COURTYARDS OF GOLDEN GATE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S. #215 NAPLES, FL 34104 US			Mailing Address C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S. #215 NAPLES, FL 34104 US		
2. Principal Place of Business		3. Mailing Address		<p>40074141</p>  <p>04132005 Chg-NP CR2E037 (10/03)</p>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-2232258				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
VASQUEZ, CINDY 4241 22ND AVE. SUITE #85 NAPLES, FL 34116			Name <u>William Laux</u> Street Address (P.O. Box Number is Not Acceptable) <u>4281 22nd Ave SW #78</u> City <u>Naples</u> FL Zip Code <u>34116</u>		
8. The above named entity submits this statement for the purpose of changing its registered office or agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 			DATE <u>4.22.05</u>		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	DP	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VASQUEZ, CINDY		NAME	Laux, William	
STREET ADDRESS	4241 22ND AVE. S.W. #85		STREET ADDRESS	4281 22nd Ave SW #78	
CITY-ST-ZIP	NAPLES, FL 34116		CITY-ST-ZIP	Naples, FL 34116	
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREIG, DENNIS		NAME	Slabach, Melvin	
STREET ADDRESS	4211 22ND AVE. S.W. #90		STREET ADDRESS	4241 22nd Ave SW #86	
CITY-ST-ZIP	NAPLES, FL 34116		CITY-ST-ZIP	Naples, FL 34116	
TITLE	DS	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WELLINGTON, KAREN		NAME	Medina, Ronald	
STREET ADDRESS	4211 22ND AVE. S.W. #89		STREET ADDRESS	4311 22nd Ave SW #76	
CITY-ST-ZIP	NAPLES, FL 34116		CITY-ST-ZIP	Naples, FL 34116	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 exemption stated in Section 119.07(3)(i), 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: 			DATE <u>4.22.05</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		