

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763365

FILED  
Feb 14, 2012  
Secretary of State

**Entity Name:** GOLDENROD VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FLARENT INC. 1488 SEMINOLA BLVD  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O FLARENT INC  
1488 SEMINOLA BLVD  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

**FEI Number:** 59-2214618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, GEOFFREY W  
1488 SEMINOLA BLVD  
CASSELBERRY, FL 32707 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: PDDS  
Name: CURRAN, MAUREEN  
Address: 7763 COUNTRY PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: RISH, CHRISTEL  
Address: 7704 COUNTRY PL  
City-St-Zip: WINTER PARK, FL 32792

Title: TD  
Name: JOHNSON, JOSEPH  
Address: 7740 COUNTRY PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: RAMOS, JOSE  
Address: 7757 COUNTRY PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: VP  
Name: SANTIAGO, JOSE  
Address: 7724 COUNTRY PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: SMITH, DONALD  
Address: 7706 COUNTRY PLACE  
City-St-Zip: WINTER PARK, FL 32792

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: MAUREEN CURRAN

PDDS

02/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date