2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004875

FILED Jan 12, 2010 Secretary of State

Entity Name: GOLFVIEW I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10681 GULF BLVD 6100 S. GULPORT BLVD. SUITE 207 GULPORT, FL 33707

TREASURE ISLAND, FL 33706

Current Mailing Address: New Mailing Address:

10681 GULF BLVD 970 LAKE CARILLON DR SUITE 207 SUITE 102

TREASURE ISLAND, FL 33706 ST. PETERSBURG, FL 33716

FEI Number: 83-0413192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PBM PBM

5901 SUN BLVD 970 LAKE CARILLON DR

S03 102 ST. PETERSBURG, FL 33715 US ST. PETERSBURG, FL 33716 US

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: 01/12/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: LEARY, MIKE Address: 5901 SUN BLVD

City-St-Zip: ST. PETERSBURG, FL 33715

Title: DT

 Name:
 MCEVOY, ELAINE

 Address:
 5901 SUN BLVD

 City-St-Zip:
 ST. PETERSBURG, FL 33715

Title: VPD

Name: REDDINGER, GAIL Address: 5901 SUN BLVD

City-St-Zip: ST. PETERSBURG, FL 33715

Title: VPD

Name: BENTON, ROBERT Address: 5901 SUN BLVD

City-St-Zip: ST. PETERSBURG, FL 33715

Title:

Name: FRANKEL, RON Address: 5901 SUNB BLVD

City-St-Zip: ST PETERSBURG, FL 33715

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: PBM RA 01/12/2010