

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90035 045 ****61.25

DOCUMENT # N04000004876

1. Entity Name

GOLFVIEW II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

730 BONNIE BRAE STREET
WINTER PARK FL 32789

Mailing Address

730 BONNIE BRAE STREET
WINTER PARK FL 32789



2. Principal Place of Business

251 WINDWARD PASS

Suite, Apt. #, etc.

SUITE F

City & State

CLEARWATER

Zip
33767

Country

PUERTO RICO

3. Mailing Address

251 WINDWARD PASS

Suite, Apt. #, etc.

SUITE F

City & State

CLEARWATER

Zip
33767

Country

PUERTO RICO

1st MOORE

CR2E037 (10/05)

4. FEI Number

83-0413195

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAVANAUGH, THOMAS L
C/O TLC CONDO MANAGEMENT, INC.
730 BONNIE BRAE STREET
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name
JIM NOBLES MANAGEMENT
Street Address (P.O. Box Number is Not Acceptable)
251 WINDWARD PASS, SUITE F
City
CLEARWATER FL Zip Code
33767

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

Sharon Green

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-23-06

FILE NOW: 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVTS
CAVANAUGH, THOMAS L
730 BONNIE BRAE STREET
WINTER PARK FL 32789 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CAVANAUGH, THOMAS L
730 BONNIE BRAE STREET
WINTER PARK FL 32789 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROSSINI, REGINA
730 BONNIE BRAE STREET
WINTER PARK FL 32789 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
D'AMICO, FRANK
730 BONNIE BRAE STREET
WINTER PARK FL 32789 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
RON FRANKEL
7217 17th St NE
ST. PETERSBURG, FL. 33702 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DUP
TUG GRAVES
6519 DEBBIE LANE
SOUTH PEADEENA, FL. 33707 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
AMY HAROLD
6150 GULFPORT BLVD #408
ST. PETERSBURG, FL. 33707 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

Ronald Frankel RONALD FRANKEL (727) 453-7060 3/8/06