FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05269

1. Corporation Name

GOLDEN RAINTREE VI HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O UNITED REALTY 3300 UNIV DRIVE #405 CORAL SPRINGS FL 33065	C/O UNITED REALTY 3300 UNIV DRIVE #405 CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified: NOV 1984

3a. Date of Last Report: 5-1-95

4. FEI Number: 59-2464392 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: GEORGE McARDLE

82 Street Address (P.O. Box Number is Not Acceptable): 3651 CARAMBOLA CIRCLE N

83

84 City: COCONUT CREEK FL 85 Zip Code: 33066

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0505, Florida Statutes.

SIGNATURE: [signature] 4/23/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12		
TITLE	P, D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GEORGE McARDLE		1.2 NAME		
STREET ADDRESS	3651 CARAMBOLA CIRCLE N		1.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FLA 33066		1.4 CITY-ST-ZIP		
TITLE	V, D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MARAY BARONICK		2.2 NAME		
STREET ADDRESS	3723 CARAMBOLA CIRCLE N		2.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK, FLA 33066		2.4 CITY-ST-ZIP		
TITLE	S, D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	STEVE SHEARS		3.2 NAME		
STREET ADDRESS	3661 CARAMBOLA CIRCLE N		3.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FLA 33066		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	DICK GEORGE		4.2 NAME		
STREET ADDRESS	3665 CARAMBOLA CIRCLE		4.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FLA 33066		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	CHRISTINE MINTZER		5.2 NAME	000001858660	
STREET ADDRESS	3753 CARAMBOLA CIRCLE		5.3 STREET ADDRESS	-06/11/96--01150--039	
CITY-ST-ZIP	COCONUT CREEK FLA 33066		5.4 CITY-ST-ZIP	***61.25	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 4/23/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #