

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90394 007 \*\*\*\*61.25

**DOCUMENT # N05269**

1. Entity Name  
**GOLDEN RAINTREE VI HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business  
1323 LYONS ROAD  
COCONUT CREEK, FL 33063

Mailing Address  
1323 LYONS ROAD  
COCONUT CREEK, FL 33063

40057470



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03172006 Chg-NP CR2E037 (11/05)

4. FEI Number  
59-2464392

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARTIN, ROBERT C ESQ.  
319 S.E. 14TH STREET  
FT. LAUDERDALE, FL 33316

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME PD  
STREET ADDRESS MCARDLE, GEORGE ☐ Delete  
CITY-ST-ZIP 3651 CARAMBOLA CIRCLE N.  
COCONUT CREEK, FL 33066

TITLE  
NAME Jason Lapaglia - TD ☐ Change ☒ Addition  
STREET ADDRESS 3765 CARAMBOLA CIR N  
CITY-ST-ZIP COCONUT CREEK FL 33066

TITLE  
NAME SD  
STREET ADDRESS GUERRY, JEAN ☒ Delete  
CITY-ST-ZIP 3647 CARAMBOLA CIRCLE NORTH  
COCONUT CREEK, FL 33066

TITLE  
NAME D  
STREET ADDRESS SANDRA LIFTIG ☐ Change ☒ Addition  
CITY-ST-ZIP 3707 CARAMBOLA CIR N  
COCONUT CREEK FL 33066

TITLE  
NAME D  
STREET ADDRESS HINDS, COREY ☒ Delete  
CITY-ST-ZIP 3753 CARAMBOLA CIRCLE NORTH  
COCONUT CREEK, FL 33066

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

TITLE  
NAME D  
STREET ADDRESS KALWITZ, CAMILLE ☐ Delete  
CITY-ST-ZIP 3603 CARAMBOLA CIRCLE N  
COCONUT CREEK, FL 33066

TITLE  
NAME SD  
STREET ADDRESS CAMILLE KALWITZ ☒ Change ☐ Addition  
CITY-ST-ZIP 3603 CARAMBOLA CIR N  
COCONUT CREEK, FL 33066

TITLE  
NAME TD  
STREET ADDRESS LEMELBZUN, LARRY ☐ Delete  
CITY-ST-ZIP 3809 CARAMBOLA CIRCLE N.  
COCONUT CREEK, FL 33066

TITLE  
NAME VP  
STREET ADDRESS LARRY LEMELBAUM ☒ Change ☐ Addition  
CITY-ST-ZIP 3809 CARAMBOLA CIR N  
COCONUT CREEK, FL 33066

TITLE  
NAME  
STREET ADDRESS ☐ Delete  
CITY-ST-ZIP

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #