2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006314

FILED Apr 06, 2009 Secretary of State

Entity Name: GOLF LAKE CONDOMINIUM II AT EAST BAY ASSOCIATION, INC.

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

960 STARKEY RD CLUBHOUSE LARGO, FL 33771

Current Mailing Address: New Mailing Address:

 960 STARKEY RD
 4585 140TH AVE NORTH

 CLUBHOUSE
 SUITE 1012

 LARGO, FL 33771
 CLEARWATER, FL 33762

FEI Number: 20-5153461 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:

COMMUNITY MANAGEMENT CONCEPTS, INC. 4585 140TH AVE. NORTH SUITE 1012 CLEARWATER, FL 33762 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition

 Name:
 HALL, MELINDA
 Name:
 TRECIAK, SUE

 Address:
 960 STARKEY RD
 Address:
 P O BOX 236

 City-St-Zip:
 LARGO, FL 33771
 City-St-Zip:
 GREENBUSH, MI 48738

Title: VPD () Delete Title: VP (X) Change () Addition

 Name:
 HALL, SAM N
 Name:
 WILSON, ROBERT

 Address:
 960 STARKEY RD
 Address:
 960 STARKEY RD

 City-St-Zip:
 LARGO, FL 33771
 City-St-Zip:
 LARGO, FL 33771

Title: STD () Delete Title: T (X) Change () Addition

 Name:
 HALL, TERRI
 Name:
 SHADBOLT, RICK

 Address:
 960 STARKEY RD
 Address:
 960 STARKEY RD 2101

 City-St-Zip:
 LARGO, FL 33771
 City-St-Zip:
 LARGO, FL 33771

 $\label{eq:title:Title:S} \textit{Title:} S \qquad \textit{() Change (X) Addition}$

 Name:
 Name:
 VAN NESS, LEE

 Address:
 Address:
 960 STARKEY RD #2203

 City-St-Zip:
 City-St-Zip:
 LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SUE TRECIAK P 04/06/2009