

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06364

FILED
Apr 13, 2010
Secretary of State

Entity Name: GOLFSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

5665 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33076 US

Current Mailing Address:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

New Mailing Address:

5665 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33076 US

FEI Number: 59-2464330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTLE, CINDY
% INTEGRITY PROPERTY
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

WHITTLE, CINDY
% INTEGRITY PROPERTY
5665 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33076 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: CINDY WHITTLE

04/13/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BLOOMER, MAUREEN
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VPD
Name: PIUREK, BILL
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: SD
Name: AUBOURG, DULNA
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: TD
Name: WALTRANT, STANTON
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D
Name: LAMBERT, BEVERLY
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

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: MAUREEN BLOOMER

PD

04/13/2010

Electronic Signature of Signing Officer or Director

Date