2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # N07015**

FILED Jul 31, 2006 8:00 am Secretary of State 07-31-2006 90003 010 ****61.25

1. Entity Nam GULFSTF ASSOCIA	REAM TO	OWNHOMES CONI IC.	DOMINIUM				31 2000	70003 01			
Principal Place of Business LANDMARK MANAGEMENT SERVICES, INC. 12323 SW 55 STREET COOPER CITY, FL 33330			Mailing Address 12323 SW 55 STREET SUITE 1002 COOPER CITY, FL 33330			1 (44) (14) 4 (14) 4 (14)	50023441				
2. Principal P	lace of Busin	ness	3. Mailing Address) 15	OFIR						
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		- / [07062006 Ch	ng- N P	CR2E03	37 (4/06)		
City & State		7 - 7 - 7 - 7		es, FL	4. FEI Number 59-262120	4		<u> </u>	plied For t Applicable		
Zip	Ĉ N	Country	3302B	Co	3/1	5. Certificate of St			8.75 Add ee Required		
	6. Name	and Address of Current		Name	7. Name and Add	ress of New R	egistered A	gent			
SONNEBC 7431-34 W 12323 SW	TATLANT		- 1002			ss (P.O. Box Number is f	Not Acceptable	;)	•		
COOPER					City				Zìp Code		
					City			FL	Zip Code	3	
	named entity ions of regist		r the purpose of changing its	s register	ed office or regis	istered agent, or both, in	the State of Flo	orida. I am fa	imiliar with,	and accept	
SIGNATURE .	Signature, lyped	or printed name of registered agent a	and title if applicable. (NO	TE: Registere	d Agent signature requ	quired when reinstating)		DATE			
	· Filing Fe	or printed name of registered agent a see is \$61.25 otember 6, 2006	9. Election Ca Trust Fund	mpaign F	inancing	\$5.00 May Be Added to Fees		DATE ake check ida Departi			
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12. 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 abother like empowered.

AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Daytime Phone #