2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08285

FILED Apr 29, 2009 Secretary of State

Entity Name: GOLF BROOK HOMEOWNERS ASSOCIATION, INC.

	Principal Place of Business:	IAGM LIMCI	pal Place of Business:
11360 FO E-6A	RTUNE CIRCLE		
	STON, FL 33414		
Current N	Mailing Address:	New Mailin	g Address:
STE 22-2:	REST HILL BLVD 21 BTON, FL 33414		
		FEI Number Not Applic	cable () Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and A	Address of New Registered Agent:
C/O A & C 11924 FO	O, GEORGE J G MANAGEMENT SERVICES PREST HILL BLVD, #22 PMB 221 BTON, FL 33414 US		
	e named entity submits this statement for the pur te of Florida.	pose of changing its	registered office or registered agent, or both,
SIGNATU			
Electronic Signature of Registered Agent			Date
OFFICER	S AND DIRECTORS:	ADDITIONS	S/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	DP () Delete TASHMAN, MYLES 11924 FOREST HILL BLVD., # 22-221 WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	()Change ()Addition
Name: Address:	DVP () Delete POZZO, ROBERT 11924 FOREST HILL BLVD., # 22-221 W. PALM BEACH, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition
Name: Address: City-St-Zip: Title: Name: Address:	POZZO, ROBERT 11924 FOREST HILL BLVD., # 22-221	Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition DVP (X) Change () Addition ARMATA, KEVIN 11924 FOREST HILL BLVD., # 22-221 WEST PALM BEACH, FL 33414
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	POZZO, ROBERT 11924 FOREST HILL BLVD., # 22-221 W. PALM BEACH, FL 33414 DVP () Delete SOLLAK, LUDWIG 11924 FOREST HILL BLVD., # 22-221	Name: Address: City-St-Zip: Title: Name: Address:	DVP (X) Change () Addition ARMATA, KEVIN 11924 FOREST HILL BLVD., # 22-221
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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: MYLES TASHMAN DP 04/29/2009