


2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jan 10, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N33587</b> 1. Entity Name GOLF MANOR I CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business C/O THOMAS W. SAVAGE 24 DOCKSIDE LANE PMB 451 KEY LARGO, FL 33037 US	Mailing Address C/O THOMAS W. SAVAGE 24 DOCKSIDE LANE PMB 451 KEY LARGO, FL 33037 US
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**DO NOT WRITE IN THIS SPACE**

01062005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0141704	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
SAVAGE, THOMAS W  
3 TORCHWOOD LANE  
KEY LARGO, FL 33037

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000175754 01/10/05-80063-015 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SAVAGE, THOMAS W 3 TORCHWOOD LANE KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAITHEL, NANCY 100 ANCHOR DR #157 KEY LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD COPELAND, DARRYL 100 ANCHOR DR #157 N KEY LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLINN, GEORGE E 01 TORCHWOOD LANE KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** Thomas W. Savage **Jan. 6, 2005** 305-367-3765  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Thomas W. SAVAGE - TREASURER