

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40763

FILED
Jan 05, 2011
Secretary of State

Entity Name: GOLF ASSOCIATION OF FLORIDA INC.

Current Principal Place of Business:

2134 HORSESHOE DR.
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

2134 HORSESHOE DR.
LAKELAND, FL 33810 US

New Mailing Address:

FEI Number: 59-3074806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COMELLA, JUDY
2134 HORSESHOE DR.
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

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:

Title: ED
Name: COMELLA, JUDITH A
Address: 2134 HORSESHOE DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: PD
Name: ALTHOUSE, KEN
Address: 7943 SW SUNNY OAKS DRIVE
City-St-Zip: ARCADIA, FL 34269

Title: DVP
Name: GODINO, FLO
Address: 7655 CROSSRIP STREET
City-St-Zip: HOBE SOUND, FL 33455

Title: TR
Name: KAREN, VATLAND
Address: 2025 MOORINGLINE DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: DIR
Name: KATHY, FAGAN
Address: 5960 SUNLAND CT.
City-St-Zip: GREENACRES, FL 33463

Title: DIR
Name: TONY, PHILLIPS
Address: 2661 S. COURSE DRIVE #408
City-St-Zip: POMPANO BEACH, FL 33069

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: JUDITH A. COMELLA

ED

01/05/2011

Electronic Signature of Signing Officer or Director

_____ Date