

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45456

FILED  
Jan 21, 2009  
Secretary of State

**Entity Name:** GOLF VIEW VILLAS VII CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SEABOARD ARBORS  
2189 CLEVELAND ST, SUITE 225  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SEABOARD ARBORS  
2189 CLEVELAND ST, SUITE 225  
CLEARWATER, FL 33765 US

**New Mailing Address:**

**FEI Number:** 59-3091482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEIGHTON, LENNARD A  
% SEABOARD ARBORS MANAGEMNET SERV.  
2189 CLEVELAND ST SUITE 225  
CLEARWATER, FL 33765 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: PD ( ) Delete  
Name: KOTH, RICHARD  
Address: 3603 DOWNFIELD PLACE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VD ( ) Delete  
Name: SCHRODER, CARL  
Address: 9150 TURNBERRY CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: PD ( ) Delete  
Name: KENNEDY, NANCY  
Address: 9223 TURNBERRY CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: KENNEDY, NANCY  
Address: 9223 TURNBERRY CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

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: RICHARD KOTH

PD

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date