## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000921

FILED Apr 19, 2006 Secretary of State

Entity Name: GOLDEN TRIANGLE RO ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2291 EAST BAY DR. LOT 119 LARGO, FL 33771 **New Mailing Address: Current Mailing Address:** 12110 SEMINOLE BLVD LARGO, FL 33778 FEI Number: 59-3158830 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAMONTE, JONATHON J ESQ. 12110 SEMINOLE BLVD. LARGO, FL 33778 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPD () Delete (X) Change ( ) Addition CORLISS, DAVID CORLISS, DAVID Name: Name: 2291 EAST BAY DR., LOT 110 Address: 2291 EAST BAY DR., LOT 110 Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: LARGO, FL 33771 US Title: () Delete Title: () Change () Addition FELTEN, ROBERT Name: Name: Address: 2291 EAST BAY DR., LOT115 Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: Title: STD () Delete Title: () Change () Addition MATTINGLY, WILLIE Name: Name: 2291 EAST BAY DR., LOT 119 Address: Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition KINGSLEY, FERN Name: Name: Address: 2291 EAST BAY DR., LOT 111 Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: Title: () Delete Title: () Change () Addition ARCORACI, DIANE Name: Name: 2291 EAST BAY DR., LOT 120 Address: Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: Title: () Delete Title: () Change () Addition NEWPOWER, HENRY Name: Name: Address: 2291 EAST BAY DR., LOT 109 Address: LARGO, FL 33771 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIE MATTINGLY STD 04/19/2006