## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000002030

FILED Apr 13, 2009 Secretary of State

Entity Name: GOLDEN ACRES ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6710 EMBASSY BLVD 6710 EMBASSY BLVD 206 PORT RICHEY, FL 34668 PORT RICHEY, FL 34668 **Current Mailing Address: New Mailing Address:** P.O. BOX 1407 PORT RICHEY, FL 34673 FEI Number: 59-3491285 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MYSZKOWIAN, MARY ANN MYSZKOWIAN, MARY ANN 6710 EMBASSÝ BLVD SUITE 204 6710 EMBASSÝ BLVD SUITE 206 PORT RICHEY, FL 34668 PORT RICHEY, FL 34668 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: 04/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete HALL, JIM SANCHEZ, MARCELINO Name: Name: 113223 LAKEVIEW DR Address: 6710 EMBASSY BLVD SUITE 206 Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: PORT RICHEY, FL 34668 Title: TD Title: (X) Change ( ) Addition () Delete HOPPES, JOE Name: TOUMBAS, INGEBURG Name: Address: 11139 KELLEHER COURT Address: 6710 EMBASSY BLVD SUITE 206 City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: PORT RICHEY, FL 34668 Title: VD () Delete Title: (X) Change ( ) Addition DONOVAN, JIM OSBORNE, RICHARD Name: Name: 11015 HIDDEN TREASURE COURT 6710 EMBASSY BLVD SUITE 206 Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: PORT RICHEY, FL 34668 Title: (X) Delete Title: () Change () Addition Name: NAPLES, PAM Name: 11248 LAKEVIEW DR Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34651 City-St-Zip: Title: (X) Delete Title: () Change () Addition POSTMA, BRENT Name: Name: 11208 KELLEHER DR Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip:

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: MARYANN MYSZKOWIAK AGEN 04/13/2009