2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2006 08:00 AM Secretary of State

| DOCL | JME | NT# | N950 | 0000 | 04283 |
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|------|-----|-----|------|------|-------|

1. Entity Name

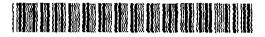
GOLFSIDE COMMERCIAL DISTRICT ASSOCIATION, INC.



Principal Place of Business

7380 MURRELL RD., STE. 201 VIERA, FL 32940 Mailing Address

7380 MURRELL RD., STE. 201 VIERA, FL 32940 ---



DO NOT WRITE IN THIS SPACE

04192006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-3343385 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DECATOR, JAY A I 7380 MURRELL RD., STE. 201 VIERA, FL. 32940

DO NOT WRITE IN THIS SPACE

| | | | IN THIS SPACE | | | |
|--|---|--|---|--|--|--|
| 5. The above the obligat | named entity submits this statement for the plans of registered agent. | ourpose of changing its registered office | e or registered agent, or b | oth, in the State of Florida. I am familiar with, and accept | | |
| SIGNATURE. | Signature, typed or printed name of registered agent and pite | d applicable. (NOTE Registered Agent si | ant signature recurred when reinstating) DATE | | | |
| | Filing Fee is \$61.25 Due by May 1, 2006 | Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees | 000000540356 05/10/06-80014-017 61.25 | | |
| 10. | OFFICERS AND DIRECTORS | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD MILLER, C SCOTT 7380 MURRELL RD., STE. 201 VIERA, FL 32940 | - | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD DECATOR, JAY A III 7380 MURRELL RD., STE. 201 VIERA, FL 32940 | : | | | | |
| TITLE HAME STREET ADDRESS CITY-ST-ZIP | TD MARTELL, PAUL | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN | THIS SPACE | | |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | | | | | | |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 47 I herebu | pertity that the information supplied with this fi | ling does not mustify for the exemption | a contained in Chanter 1: | Exprise Statutes further partitution that the information | | |

12. I nereby certify that the information supplied with this thing boes not quality for the exemptions contained 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 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:

FLI MILL Paul Martell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.20.06

321-242-1200

Daytora Phoca &