

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 JUL 23 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000006797

1. Entity Name

GOLF PARK PROPERTY OWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6870 S.E. 99th Place

Suite, Apt. #, etc.

3. Mailing Address

100 S.E. 2nd Street

Suite, Apt. #, etc.

Suite 2315-A

REINSTATEMENT 01-03
DO NOT WRITE IN THIS SPACE

City & State

Belleview, FL

City & State

Miami, FL

4. FEI Number

59-3567362

Applied For

Not Applicable

Zip
34420

Country
US

Zip
33131

Country
US

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

IBC FIDUCIARY INC.

Street Address (P.O. Box Number is Not Acceptable)

100 S.E. 2nd Street

Suite 2315-A

City

Miami

FL

Zip Code
33131

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

July 2, 2003

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-D SMEJDA, L. 100 S.E. 2nd Street; #2315-A Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HENLEY, J. 444 Brickell Ave. #51-246 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRAHLING, P. 6870 S.E. 99th Place Belleview, FL 34420
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NUH, A. 444 Brickell Ave., #51-246 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-VP GRAHLING, J. 6870 S.E. 99th Place Belleview, FL 34420
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROBBINS, J. 9830 S.E. 64th Ave. Belleview, FL 34420

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	700021782947 07/25/03-01004-017 **358.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] A. NUH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/03

Date

(305) 358-4441

Daytime Phone #

CR2E034B (12/01)

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