

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155202

Entity Name: GOLF VIEW REALTY, INC

FILED
Jul 10, 2007
Secretary of State

Current Principal Place of Business:

8565 W. LINEBAUGH AVE
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

8565 W. LINEBAUGH AVE
TAMPA, FL 33625

New Mailing Address:

FEI Number: 20-3831245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSON & HOLWELL, PLLC
% SEAN JOHNSON
24724 STATE ROAD 54 #107
LUTZ, FL 33559 US

Name and Address of New Registered Agent:

JOHNSON & HOLWELL, PLLC
10971 COUNTRYWAY BLVD.
TAMPA, FL 33626 US

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:

07/10/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAPPA, HOLLY L
Address: 10319 GREEN HODGES DR,
City-St-Zip: TAMPA, FL 33626

Title: VP () Delete
Name: ANDERSON, MARY H
Address: 8565 W. LINEBAUGH AVE
City-St-Zip: TAMPA, FL 33635

Title: STV () Delete
Name: PAPPA, GERALD
Address: 10319 GREEN HODGES DR
City-St-Zip: TAMPA, FL 33626

Title: V () Delete
Name: ANDERSON, JAMES L
Address: 6212 IMPERIAL KEY
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAPPA, HOLLY L
Address: 10319 GREENHEDGES DR.
City-St-Zip: TAMPA, FL 33626

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

Title: STV (X) Change () Addition
Name: PAPPA, GERALD A
Address: 10319 GREENHEDGES DR.
City-St-Zip: TAMPA, FL 33626

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD A. PAPPA

STV

07/10/2007

Electronic Signature of Signing Officer or Director

Date