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Feb 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756601 (1)

1. Corporation Name

GULF POINTE INTERVALS, INC.

Principal Place of Business

9429 GULFSHORE DRIVE
NAPLES FL 33963

Mailing Address

9429 GULFSHORE DRIVE
NAPLES FL 34108-2011

3. Date Incorporated or Qualified
03/03/1981

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

25

Zip

Country

29

30

4. FEI Number
59-2074048

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RONDEAU, BEVERLY A.
1754 41ST TERR SW
NAPLES FL 33999

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T LANCaster, FRED ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
1127 SE 31ST STREET
CAPE CORAL FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

D COUGHLIN, PATRICIA ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
312 OAK
NORTON MA

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
73 SECRETARY
IRENE CARBONE
13 MARION
GREENVALE, NY 11548

DPDT GRIFFITH, ROBERT E. ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
10701 GULF SHORE DR.
NAPLES, FL 00000

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
D
GRIFFITH, ROBERT E.
1909 EMPRESS CT.
NAPLES, FL 34110

7 S PIPER, HUGH ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
12 LINCOLN AV N
LEHIGH ACRES FL

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
7 P
PIPER, HUGH
12 LINCOLN AVE. N.
LEHIGH ACRES, FL 33936

7 D HARROLD, ROBERT ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
3 GRAY AV
HAMPTON NH

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
7 VP
HARROLD, ROBERT
3 GRAY AVE.
HAMPTON, N.H. 03842

☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frederick J. ... 01/11/97

CR2E037 (9/96)