

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90035 013 ****61.25

DOCUMENT # 770846

1. Entity Name

GULF GATE GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

C/O DIANA HURST
3121 MOHAWK ST
SARASOTA FL 34276
US

Mailing Address

C/O DIANA HURST
PO BOX 17306
SARASOTA FL 34276
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2520789

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HURST, DIANA
3121 MOHAWK ST
SARASOTA FL 34231

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DST ☐ Delete
NAME FRIMBERGER, USHI
STREET ADDRESS 2974 57TH ST
CITY-ST-ZIP SARASOTA FL 32443

TITLE DP ☐ Delete
NAME WHETZEL, SUE
STREET ADDRESS 7271 CLOISTER DR
CITY-ST-ZIP SARASOTA FL 34231

TITLE DVP ☐ Delete
NAME RUIZ-BOSCH, FERNANDO
STREET ADDRESS 7277 CLOISTER DR
CITY-ST-ZIP SARASOTA FL 34231

TITLE D ☒ Delete
NAME HARRIS, STEVE
STREET ADDRESS 6371 RAVENWOOD CT
CITY-ST-ZIP SARASOTA FL 34243

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DST ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Julie Whitney
STREET ADDRESS 2219 Calusa Lakes Blvd
CITY-ST-ZIP Nokomis, FL 34275

TITLE DVP ☐ Change ☒ Addition
NAME TAMARA Mandrich
STREET ADDRESS 5855 Midnight Pass Rd
CITY-ST-ZIP Sarasota, FL 34242

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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: *Fernando Ruiz-Bosch* - Fernando Ruiz-Bosch - Pres.

3/7/04

(941) 924-8154

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #