## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000006951

FILED Jun 30, 2009 Secretary of State

Entity Name: GULF HARBOR MOORINGS, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O BOB DIMODICA C/O BOB DIMODICA 1316 GRAND CANAL DR. 731 PARK AVE. NAPLES, FL 34110 NAPLES, FL 34110 **Current Mailing Address:** New Mailing Address: C/O ROBERT DIMODICA C/O ROBERT DIMODICA 1316 GRAND CANAL DR. 731 PARK AVE. NAPLES, FL 34110 NAPLES, FL 34110 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIMODICA, ROBERT DIMODICA, ROBERT 1316 GRAND CANAL DR. 731 PARK AVE. NAPLES, FL 34110 NAPLES, FL 34110 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: 06/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition DIMODICA, ROBERT DIMODICA, ROBERT Name: Name: Address: 1316 GRAND CANAL DR. Address: 731 PARK AVE. City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110 Title: () Delete Title: () Change () Addition Name: ZUMSTEIN, SCOTT Name: Address: 436 GOLFVIEW DRIVE Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: () Delete Title: () Change () Addition TREMULIS, KIMBERELY Name: Name: 751 GLENDALE AVE. Address: Address: City-St-Zip: NAPLES, FL 34110 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT DIMODICA P 06/30/2009