

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01612

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** THE GALLEON RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

617 FRONT STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

617 FRONT STREET  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 59-2512207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LETSCHERT, TRUDO  
1510 S. TUTTLE AVE.  
SARASOTA, FL 34239 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MASTENBROEK, HENK  
Address: 1510 S. TUTTLE AVE.  
City-St-Zip: SARASOTA, FL

Title: VPS  
Name: LETSCHERT, TRUDO  
Address: 1510 S TUTTLE AVENUE  
City-St-Zip: SARASOTA, FL

Title: D  
Name: WRIGHT, BARBARA  
Address: 1989 RIVER MIST CIRCLE  
City-St-Zip: NEW MARKET, TN 37802

Title: T  
Name: SMITH, ROY B  
Address: 1510 S TUTTLE AVENUE  
City-St-Zip: SARASOTA, FL

Title: D  
Name: SPRAGUE, MARY JANE  
Address: 6277 BARNSIDE DRIVE  
City-St-Zip: CANAL WINCHESTER, OH

I hereby 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 all other like empowered.

SIGNATURE: TRUDO LETSCHERT

VPS

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date