

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 08, 1999 8:00 am  
Secretary of State

03-08-1999 90055 035 \*\*\*\*61.25

0069876

DOCUMENT # N03390

1. Corporation Name

GASPARILLA CAY HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 489  
HOMOSASSA SPRINGS FL 34447  
US

Mailing Address

P.O. BOX 489  
HOMOSASSA SPRINGS FL 34447  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

06/01/1984

4. FEI Number

58-1847891

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

9. Name and Address of Current Registered Agent

HELMRICH, DICK  
5198 SOUTH RIVERVIEW CIR  
HOMOSASSA FL 34448

10. Name and Address of New Registered Agent

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

TITLE PD  
NAME HELMRICH, DICK  
STREET ADDRESS 5198 S RIVERVIEW CIR  
CITY-ST-ZIP HOMOSASSA FL 34448  
☒ DELETE

TITLE VD  
NAME GREEN, GERRY  
STREET ADDRESS 5258 S. RIVERVIEW CIRCLE  
CITY-ST-ZIP HOMOSASSA FL  
☒ DELETE

TITLE TD  
NAME SPRATT, RAYMOND  
STREET ADDRESS 5204 S RIVERVIEW CIR  
CITY-ST-ZIP HOMOSASSA FL 34448  
☐ DELETE

TITLE SD  
NAME LINDSAY, JANE  
STREET ADDRESS 11577 W ROSA COURT  
CITY-ST-ZIP HOMOSASSA FL 34448  
☒ DELETE

TITLE D  
NAME MORGAN, PAT  
STREET ADDRESS 5200 S. RIVERVIEW CIR  
CITY-ST-ZIP HOMOSASSA FL 34448  
☐ DELETE

TITLE D  
NAME CASEY, JAMES  
STREET ADDRESS 5182 S. RIVERVIEW CIR  
CITY-ST-ZIP HOMOSASSA FL  
☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D  
1.2 NAME JIM LEWIS  
1.3 STREET ADDRESS 5246 S. RIVERVIEW CIR.  
1.4 CITY-ST-ZIP HOMOSASSA FL 34448  
☒ Change ☒ Addition

2.1 TITLE V/D  
2.2 NAME FRED CARMICHAEL  
2.3 STREET ADDRESS 5254 S. RIVERVIEW CIR.  
2.4 CITY-ST-ZIP HOMOSASSA FL 34448  
☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE S/D  
4.2 NAME RUTH ALGEO  
4.3 STREET ADDRESS 5270 S. RIVERVIEW CIR.  
4.4 CITY-ST-ZIP HOMOSASSA, FL 34448  
☐ Change ☒ Addition

5.1 TITLE D  
5.2 NAME JEANNE GARDNER  
5.3 STREET ADDRESS 11576 W. ROSA CT  
5.4 CITY-ST-ZIP HOMOSASSA, FL 34448  
☐ Change ☒ Addition

6.1 TITLE D  
6.2 NAME BRUCE BRENNAN  
6.3 STREET ADDRESS 5192 S. RIVERVIEW CIR.  
6.4 CITY-ST-ZIP HOMOSASSA, FL 34448  
☐ Change ☒ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

RUTH ALGEO  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/99 352 628-5382  
Date Daytime Phone #

CR2E037 (11/98)