2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Sep 11, 2006 8:00 am Secretary of State

DOCUMENT # N05000011083 1. Entity Name GULF HARBOR MARINA CONDOMINIUM ASSOCIATION, INC.							09-11-2006	90005 038 ****	61.25
Principal Place of Business 800 NORTH HIGHLAND AVENUE STE 200 0RLANDO, FL 32803 Mailing Address 800 NORTH HIGHLAND AVENUE STE 200 0RLANDO, FL 32803				AVENUE	E STE 200			·	
2. Principal Place of Business 3.			3. Mailing Address						
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			08252006	Chg-NP	CR2E037 (4/06)	
City & State		Ci	City & State			4. FEI Number	4134708	 -	oplied For ot Applicable
Zip	Zip Country		Zip Cou		intry	5. Certificate of	f Status Desired	\$8.75 Add	ditional
	6. Name and Address of	of Current Register	ed Agent			7. Name and	Address of New R		
WILLIAMS	: WARREN E				Name				
WILLIAMS, WARREN E 800 NORTH HIGHLAND AVENUE STE 200 ORLANDO, FL 32803					Street Address (P.O. Box Number is Not Acceptable)				
					Cib				
	named entity submits this st				City	•		FL Zip Cod	
the obligat	ions of registered agent. Signature, typed or printed name of re	adistered agant and title if ap		Pagalaga		- Sr			<u>-</u>
			pacable. (NOTE:	negisteret	d Agent signature require	d when reinstating)		DATE	
D	Filing Fee is \$61.25 ue by September 6, 2		9. Efection Cam Trust Fund Co	paign F	inancing	\$5.00 May Be Added to Fees	, M Flori	ake check payable i	to tate
10.	ue by September 6, 2 OFFICER		9. Election Cam Trust Fund Co	paign Fontributi	inancing ion.	\$5.00 May Be Added to Fees	Flori	ake check payable i	tate
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12. I needy certify that the information supplied with first time does not qualify for the exemptions contained 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 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 trusted 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:

INSTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-31-06 417-292-771