

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000004298	
1. Entity Name THE MIRAGE ON THE GULF CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 1070 S COLLIER BLVD MARCO ISLAND, FL 34145	Mailing Address 1070 S COLLIER BLVD MARCO ISLAND, FL 34145
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DO NOT WRITE IN THIS SPACE



03152006 No Chg-NP CRZE037 (11/05)

4. FEI Number 65-0611374	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GREUSEL, JAMIE B 1104 N COLLIER BLVD. MARCO ISLAND, FL 34145
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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 _____
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Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D GOODSPEED, JOHN 1070 S. COLLIER BLVD #207 MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALLAHAN, KATHY 1036 RIDGE VIEW DR INVERNESS, IL 60010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PIDHERNY, DENNIS 1070 S COLLIER BLVD., #502 MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROESCHEN, ROBERT 1070 S COLLIER BLVD., #705 MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAPATO, DON 1070 S COLLIER BLVD., #507 MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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 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: <u>Dennis Pidherny Dennis Pidherny</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>4/6/06</u> Date	<u>839-825-5325</u> Daytime Phone #
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