

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725574

1. Entity Name

GULF SHORES PROPERTY OWNERS' ASSOCIATION, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90095 034 ****61.25

Principal Place of Business

Mailing Address

997 FISHCROW RD
SANIBEL FL 33957
US

997 FISHCROW RD
SANIBEL FL 33957
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1443061

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONGRAM, SAMUEL R
997 FISHCROW RD
SANIBEL FL 33957

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Samuel R Congram

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-22-00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME CRUICHSHANK, BILL
STREET ADDRESS 1063 BLUE HERON DR.
CITY-ST-ZIP SANIBEL FL

TITLE P ☒ Change ☐ Addition
NAME Dowling, Thomas
STREET ADDRESS 1020 White Ibis Dr.
CITY-ST-ZIP Sanibel, FL 33957

TITLE VP ☐ Delete
NAME DOWLING, THOMAS
STREET ADDRESS 1020 WHITE IBIS DRIVE
CITY-ST-ZIP SANIBEL FL

TITLE VP ☒ Change ☐ Addition
NAME Ted Smith
STREET ADDRESS 4472 Waters Edge Lane
CITY-ST-ZIP Sanibel, FL 33957

TITLE T ☐ Delete
NAME CONGRAM, SAMUEL
STREET ADDRESS 997 FISHCROW RD
CITY-ST-ZIP SANIBEL, FL 00000

TITLE T ☐ Change ☐ Addition
NAME Congram, Samuel
STREET ADDRESS 997 Fishcrow Rd.
CITY-ST-ZIP Sanibel, FL 33957

TITLE D ☐ Delete
NAME KLEIN, MYRON
STREET ADDRESS 1053 BLUE HERON DR.
CITY-ST-ZIP SANIBEL, FL 00000

TITLE D ☐ Change ☐ Addition
NAME Fisher, Bill
STREET ADDRESS 1011 Fishcrow Rd.
CITY-ST-ZIP Sanibel, FL 33957

TITLE D ☐ Delete
NAME LEOPOLD, CARL D
STREET ADDRESS 1010 FISHCROW RD.
CITY-ST-ZIP SANIBEL, FL 00000

TITLE D ☐ Change ☐ Addition
NAME Leopold, Carl
STREET ADDRESS 1010 Fishcrow Rd.
CITY-ST-ZIP Sanibel, FL 33957

TITLE D ☐ Delete
NAME TUTTLE, LOUISE
STREET ADDRESS 1100 WHITE IBIS DRIVE
CITY-ST-ZIP SANIBEL FL

TITLE D ☐ Change ☐ Addition
NAME Tuttle, Louise
STREET ADDRESS 1100 White Ibis Drive
CITY-ST-ZIP Sanibel, FL 33957

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.01(3)(b), 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:

Samuel R Congram
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAMUEL R CONGRAM

Date

Daytime Phone #

3-22-00 941-472-4691

CR2E037 (9/99)