

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723481

**Entity Name:** GULF MARINER CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**24701 US HWY 19 NORTH  
SUITE 102  
CLEARWATER, FL 33763**Current Mailing Address:**24701 US HWY 19 NORTH  
SUITE 102  
CLEARWATER, FL 33763**FEI Number:** 59-1441559**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWDER, KAREN  
24701 US HWY 19 NORTH  
SUITE 102  
CLEARWATER, FL 33763 US*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

**Officer/Director Detail :**

Title PD  
Name SIERRA, OSCAR  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title VPD  
Name GONZALEZ, RON  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title TD  
Name SHAVER, CLYDE  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name RUSSO, RICK  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title SD  
Name SANCHEZ, LOUIS  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name BURKLEY, SAM  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name SEIDENBERG, DAVID  
Address 24701 US HWY 19 NORTH  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

*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:** OSCAR SIERRA

PD

04/08/2017

Electronic Signature of Signing Officer/Director Detail

Date