2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724563

Entity Name: TOWN SHORES OF GULFPORT, NO. 209, INC.

FILED
Apr 09, 2019
Secretary of State
9681919703CC

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. SUITE 260 CLEARWATER, FL 33762

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. SUITE 260 CLEARWATER, FL 33762 US

FEI Number: 59-1533030 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TANKEL, ROBERT 1022 MAIN ST. SUITE D

DUNEDIN, FL 34698 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: ROBERT TANKEL 04/09/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitlePRESIDENTTitleTREASURERNameSCULTHORPE, GEORGENameKOLLIAS, JOHN

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR Title VP

Name PORTNOY, HERSCHEL Name MCLOUGHLIN, SEAN

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title SECRETARY Title DIRECTOR

Name DEMARCO, JOSEPH Name GRUNDHOFF, GEORGE

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name LYNCH, JAY

Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762

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: SCULTHORPE, GEORGE PRESIDENT 04/09/2019