

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724563

FILED
Apr 09, 2019
Secretary of State
9681919703CC

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

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 :

Title PRESIDENT
Name SCULTHORPE, GEORGE
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title TREASURER
Name KOLLIAS, JOHN
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name PORTNOY, HERSCHEL
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title VP
Name MCLOUGHLIN, SEAN
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title SECRETARY
Name DEMARCO, JOSEPH
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name GRUNDHOFF, GEORGE
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DR. SUITE 260
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

Electronic Signature of Signing Officer/Director Detail

Date