2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744768

Entity Name: GULF AIRE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

201 CHRISTINS CURVE
PORT SAINT JOE, FL 32456

Current Mailing Address:

P O BOX 13787
MEXICO BCH, FL 32410

FEI Number: 59-2120899

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOLAN, NATALIE
705 GULF AIRE DRIVE
PORT ST. JOE, FL 32456 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: NATALIE DOLAN   02/18/2020

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	TREASURER	Title	PRESIDENT
Name	GRANEY, PIERCE T	Name	DOLAN, NATALIE
Address	8513 TRADEWINDS DRIVE	Address	705 GULF AIRE DRIVE
City-State-Zip:	PORT SAINT JOE FL 32456	City-State-Zip:	PORT SAINT JOE FL 32456
Title	DIRECTOR	Title	DIRECTOR
Name	DARDEN, FRANK	Name	LAKEY, CAMILLE
Address	103 BUCCANEER DRIVE	Address	202 SEA PINES LANE
City-State-Zip:	PORT ST. JOE FL 32456	City-State-Zip:	PORT ST. JOE FL 32456
Title	VP	Title	DIRECTOR
Name	CARROLL, MICHAEL	Name	VERNOR, MICHAEL
Address	628 GULF AIRE DRIVE	Address	711 GULF AIRE DRIVE
City-State-Zip:	PORT ST. JOE FL 32456	City-State-Zip:	PORT ST. JOE FL 32456
Title	DIRECTOR		
Name	ALLEMORE, ELLEN		
Address	212 BUCCANEER DRIVE		
City-State-Zip:	PORT SAINT JOE FL 32456		

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: NATALIE DOLAN   PRESIDENT   02/18/2020

Electronic Signature of Signing Officer/Director Detail   Date