

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

DOCUMENT# 749712

**Entity Name:** GLOUCESTER E CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 29, 2017**  
**Secretary of State**  
**CC9214042962**

**Current Principal Place of Business:**

FIRST SERVICE RESIDENTIAL  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**Current Mailing Address:**

FIRST SERVICE RESIDENTIAL  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573 US

**FEI Number: 59-2046608**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BUSH ROSS REGISTERED AGENT SERVICES, LLC  
1801 NORTH HIGHLAND AVE  
TAMPA FL 33602 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: BUSH ROSS, PA**

**03/29/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name TOWNER, WALTER  
Address 777 MASTERPIECE DRIVE  
City-State-Zip: SUN CITY CENTER FL 33573

Title TD  
Name RICKETTS, NOREEN  
Address 404 GLOUCESTER BLVD  
City-State-Zip: SUN CITY CENTER FL 33573

Title D  
Name STRICKLAND, JOYCE  
Address 2216 GREENWICH DR.  
City-State-Zip: SUN CITY CENTER FL 33573

Title VP  
Name MAZE, ROBERT  
Address 1610 HOVINGTON CIRCLE  
City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY  
Name DEVINE, KATHERINE  
Address 1013 HAREFIELD CIRCLE  
City-State-Zip: SUN CITY CENTER FL 33573

*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: WALTER TOWNER**

**PRESIDENT**

**03/29/2017**

Electronic Signature of Signing Officer/Director Detail

Date