

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750904

**FILED**  
**Mar 18, 2019**  
**Secretary of State**  
**3125191871CC**

**Entity Name:** VANDERBILT GULFSIDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10851 GULF SHORE DR.  
NAPLES, FL 34108

**Current Mailing Address:**

10851 GULF SHORE DR.  
NAPLES, FL 34108

**FEI Number:** 59-2202214

**Certificate of Status Desired:** Yes

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

BECKER & POLIAKOFF, P.A.  
4001 TAMiami TRAIL NORTH, SUITE 410  
NAPLES, FL 34103 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 SECRETARY  
Name WONDASCH, PAUL  
Address 15 TOTTEN DRIVE  
City-State-Zip: BRIDGEWATER NE 08807

Title PRESIDENT  
Name TOTER, VICTORIA  
Address 10951 GULF SHORE DR  
1005  
City-State-Zip: NAPLES FL 34108

Title DIRECTOR  
Name REID, ALLAN  
Address 820 CRAIG DRIVE  
City-State-Zip: HENDERSON KY 42420

Title DIRECTOR  
Name POPOWYCH, NESTER  
Address 33 PARK LANE  
City-State-Zip: PARK RIDGE IL 60068

Title DIRECTOR  
Name BURR, PETER  
Address 5007 LONG KNIFE RUN  
City-State-Zip: LOUISVILLE KY 40207

Title VP  
Name HOOPER, TOM  
Address 10-12 DELAWARE DRIVE  
City-State-Zip: SALEM NH 03079

Title DIRECTOR  
Name NORMAN, KAREN  
Address 9230 OVERLOOK TRAIL  
City-State-Zip: EDEN PRAIRIE MN 55347

Title TREASURER  
Name MOODY, GARRY L  
Address PO BOX 791  
City-State-Zip: CENTER HARBOR NH 03226

**Continues on page 2**

*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:** VICTORIA TOTER

**PRESIDENT**

**03/18/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           MANAGER  
Name           DAMMERT, WAYNE G  
Address        333 PINEHURST CIR  
City-State-Zip: NAPLES FL 34113

Title           DIRECTOR  
Name           WHITE, FREDERICK V JR.  
Address        3507 NANTUCKET DR  
City-State-Zip: LOVELAND OH 45140