

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766911

Entity Name: GULL AIRE VILLAGE ASSOCIATION, INC.**Current Principal Place of Business:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763**Current Mailing Address:**24701 US HIGHWAY 19 NORTH
SUITE 102
CLEARWATER, FL 33763 US**FEI Number:** 59-2252029**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWDER, KAREN
24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 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	VPD
Name	LYTTLE, BOB
Address	24701 US HIGHWAY 19 NORTH SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	DIR
Name	CHICOLLO, FRANK
Address	24701 US HIGHWAY 19 NORTH SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	DIR
Name	FILLIPON, SANDY
Address	24701 US HIGHWAY 19 NORTH SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	PD
Name	LAMARCA, KEN
Address	24701 US HIGHWAY 19 NORTH SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	TD
Name	THEAL, BONNIE
Address	24701 US HIGHWAY 19 NORTH SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	SD
Name	HITE, THERESE
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	DIR
Name	FREEMAN, CHARLES
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

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: KEN LAMARCA

PD

04/08/2017

Electronic Signature of Signing Officer/Director Detail_____
Date