## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006105

Entity Name: BAREFOOT BEACH RESORT OF INDIAN SHORES

CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19417 GULF BOULEVARD INDIAN SHORES, FL 33785

**Current Mailing Address:** 

C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301 SAINT PETERSBURG, FL 33702 US

FEI Number: 20-3096863 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC 9887 FOURTH STREET NORTH SUITE 301

ST. PETERSBURG, FL 33702 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: MICHAEL FLEMING 01/16/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name BORNICK, BRUCE Name REILLY, DENISE

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 FOURTH STREET NORTH SUITE 9887 FOURTH STREET NORTH SUITE

City-State-Zip: SAINT PETERSBURG FL 33702 City-State-Zip: SAINT PETERSBURG FL 33702

Title TREASURER Title SECRETARY
Name ARTZ, HARRY Name PORTE, KIM

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 FOURTH STREET NORTH SUITE 9887 FOURTH STREET NORTH SUITE

City-State-Zip: SAINT PETERSBURG FL 33702 City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name FRITZ, JOSEPH

Address C/O ASSOCIA GULF COAST

9887 FOURTH STREET NORTH SUITE

301

City-State-Zip: SAINT PETERSBURG FL 33702

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: BRUCE BORNICK PRESIDENT 01/16/2017

FILED Jan 16, 2017

**Secretary of State** 

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