

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44222

Entity Name: GULF SHORES NORTH PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Apr 11, 2023
Secretary of State
7845194226CC**Current Principal Place of Business:**3754 CAPE HAZE DR
ROTONDA WEST, FL 33947**Current Mailing Address:**P.O.BOX 3446
PLACIDA, FL 33946 US**FEI Number: 22-3124770****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FREEMAN, PAUL T.
3754 CAPE HAZE DRIVE
ROTONDA WEST, FL 33947 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: PAUL T. FREEMAN****04/11/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** TREASURER
Name DALY, PATRICK
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** DIRECTOR
Name BORNTAEGER, COURTNEY
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** DIRECTOR
Name MORACA, SERGE
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** SECRETARY
Name PARISH, LIZ
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** DIRECTOR
Name BELL, RANDY
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** PRESIDENT
Name DRAKE, RONALD
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** DIRECTOR
Name CAMPBELL, SAMUEL
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**Title** VP
Name SNOWDON, ANN
Address P.O.BOX 3446
City-State-Zip: PLACIDA FL 33946**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: RONALD DRAKE**PRESIDENT****04/11/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WOODWORTH, HEATHER
Address	P.O.BOX 3446
City-State-Zip:	PLACIDA FL 33946