

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001003

Entity Name: GULF DUNES CONDOMINIUM OWNERS ASSOCIATION, INC.

FILED
Apr 01, 2019
Secretary of State
9464429717CC

Current Principal Place of Business:

130 STAFF DR. NE
FORT WALTON BEACH, FL 32548

Current Mailing Address:

PO BOX 2613
FORT WALTON BEACH, FL 32549 US

FEI Number: 59-3464895

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RDF ASSOCIATES, INC.
130 STAFF DR. NE
FORT WALTON BEACH, FL 32548 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: DEBBIE FOWNER

04/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GARGUILO, FRANK
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title DT
Name BLAHA, JAMES
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title VP
Name DAVIS, BARRY
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title SECRETARY
Name HUDSON, CHARLIE
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title DIRECTOR
Name WILSON, SHARON
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title DIRECTOR
Name DUNCAN, CARL
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title MGR
Name WOLVERTON, CHARLOTTE
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

Title DIRECTOR
Name HALL, LAURA
Address PO BOX 2613
City-State-Zip: FORT WALTON BEACH FL 32549

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: CHARLOTTE WOLVERTON

MGR

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date