## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2005 8:00 am Secretary of State

DOCUMENT # 713908  1. Entity Name GULF POINT ASSOCIATION, INC.			0	4-26-2005 90128 0	32 ****6	1.25
Principal Place of Business 200 THE ESPLANADEN VENICE, FL 34285 US	Mailing Address 1162 INDIAN HILLS BLVD. VENICE, FL 34293 US					
2. Principel Place of Rusiness :	3. Mailing Address					
2. Principel Place of Ausiness  Suite, AB62eMDIAN HILLS BLVD.  3. Mailing Address  Suite, Apt. #, etc.				37 (10/03)	,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
VENICE, FL 34293	City & State		4. FEI Number 59-123488		Ar	oplied For
Zip Country/	Zip	Country	59-1234882   Not Applicable  5. Certificate of Status Desired   \$8.75 Additional Fee Required			
6. Name and Address of Current Reg	istered Agent		7. Name and Add	ress of New Registered A		<u></u>
CALDWELL, ANNETTE K 1162 INDIAN HILLS BLVD. Street VENICE, FL 34293		Street Address	ess (P.O. Box Number is Not Acceptable)			
VENIOE, 1 E 34293		677			17:0:	
		City		FL	Zip Cod	l <del>e</del>
8. The above named entity submits this statement for th the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and		gistered office or regist		the State of Florida. 1 am 1	familiar with,	and accept
	(101210		accumentation and	UNIE		
Filing Fee is \$61.25  Due by May 1, 2005  Trust Fund Contribution.		\$5.00 May Be Added to Fees  Make check payable to Florida Department of State				
10. OFFICERS AND DIREC	TORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DI	RECTORS IN	J 10
TITLE SD		TILE TO		1.4		
L LIOUNICON CLODIA	☐ Delete	110	JUAN JENIJAI	tt	☐ Change	Addition
NAME JOHNSON, GLORIA STREET ADDRESS 200 THE ESPI ANDE N C-14	☐ Delete	NAME	John Jehluar 200 The East	laradle N. #AI	☐ Change	
NAME JOHNSON, GLORIA STREET ADDRESS 200 THE ESPLANDE N C-14 CITY-ST-ZIP VENICE, FL	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	John Jehluar 200 The Egal Venice IL	lanadle N. #AI 34295	☐ Change	
STREET ADDRESS 200 THE ESPLANDE N C-14  VENICE, FL  TITLE PD  NAME EAGLESTON, JAMES  STREET ADDRESS 200 THR ESPLANADE N # C3	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	200 The Egal Venice II	larade N. #AI 34285 MA BOWMAN larade N. #A8	☐ Change	
STREET ADDRESS CITY-ST-ZIP VENICE, FL  PD EAGLESTON, JAMES STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	200 The Egal Venice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP VENICE, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285 TITLE TD		NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	200 The Egal Vanice II	lanadle N. #A1 34295		Addition
STREET ADDRESS CITY-ST-ZIP VENICE, FL  PD EAGLESTON, JAMES STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL  VENICE, FL  PD EAGLESTON, JAMES 200 THR ESPLANADE N # C3 VENICE, FL 34285  TITLE TD NAME BARNETT, KEN	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP / VENICE, FL  TITLE PD EAGLESTON, JAMES STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285 TITLE NAME STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285 TITLE VD  TITLE VD	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
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STREET ADDRESS CITY-ST-ZIP / VENICE, FL  TITLE PD EAGLESTON, JAMES STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285 TITLE NAME STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285 TITLE VD  TITLE VD	□ Delete  Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP / VENICE, FL  TITLE PD EAGLESTON, JAMES STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285 TITLE NAME BARNETT, KEN STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285  TITLE NAME BARNETT, KEN STREET ADDRESS CITY-ST-ZIP / VENICE, FL 34285  TITLE NAME SUNKIN, JOAN STREET ADDRESS STREET ADDRESS SUNKIN, JOAN STREET ADDRESS 200 THE ESPLANADE N B14	Delete  Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change	Addition  Addition
STREET ADDRESS CITY-ST-ZIP / VENICE, FL  TITLE	□ Delete  Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change ☐ Change	Addition  Addition  Addition
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STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  VENICE, FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP  VENICE, FL  TO BARNETT, KEN 200 THE ESPLANADEN, B-19 VENICE, FL  34285  TITLE NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL  34285  VENICE, FL  34285  VENICE, FL  34285  TITLE VENICE, FL  34285  VENICE, FL  34285  VENICE, FL  34285  VENICE, FL  TITLE NAME SUNKIN, JOAN STREET ADDRESS CITY-ST-ZIP  D  BRUNERMER, RICHARD A STREET ADDRESS CITY-ST-ZIP VENICE, FL  VENICE, FL  VENICE, FL  VENICE, FL  D  CONTROL OF THE SPLANADEN, C18 VENICE, FL  VENICE, FL  VENICE, FL  VENICE, FL	Delete Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	200 The Egal Vanice II	lanadle N. #A1 34295	☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/2005 (94) 485-8140

Date Daytime Phone #