

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715159

FILED
Apr 15, 2009
Secretary of State

Entity Name: 400 GOLDEN GATE POINT ASSOCIATION, INC.

Current Principal Place of Business:

400 GOLDEN GATE POINT
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

616 GOLDEN GATE POINT
1
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 59-1272130 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TUTTLE, MARTIN
616 GOLDEN GATE POINT
1
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GIAN-GRASSO, JANICE
Address: 400 GOLDEN GATE PT, #41
City-St-Zip: SARASOTA, FL 34236 US

Title: DV () Delete
Name: VOLZ, VIRGINIA
Address: 400 GOLDEN GATE POINT #11
City-St-Zip: SARASOTA, FL 34236 US

Title: DS () Delete
Name: LAVENDER, MARJORIE
Address: 400 GOLDEN GATE PT, #53
City-St-Zip: SARASOTA, FL 34236 US

Title: DT () Delete
Name: ZOELLNER, KATHERINE
Address: 400 GOLDEN GATE PT, #21
City-St-Zip: SARASOTA, FL 34236 US

Title: D () Delete
Name: VAN DERVOOT, ELLEN
Address: 400 GOLDEN GATE POINT #42
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: BILLINGS, JAMES R
Address: 400 GOLDEN GATE POINT #12
City-St-Zip: SARASOTA, FL 34236 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARTIN TUTTLE

CAM

04/15/2009

Electronic Signature of Signing Officer or Director

Date