FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 FEB -9 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 715807 (4)

1. Corporation Name
GULF HARBORS CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
4909 MARINE PARKWAY NEW PORT RICHEY FL 34652	4909 MARINE PARKWAY NEW PORT RICHEY FL 34652

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/31/1968
3a. Date of Last Report: 02/08/1994
4. FEI Number: 59-1613934 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BECKER POLIAKOFF PA
33 NORTH GARDEN AVE
SUITE 960
CLEARWATER FL 36415

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
200001403002
-02/10/95--01045--005
****130.00 ****130.00
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P ☑ Change ☐ Addition
NAME	BARCIA, BEN	1.2 NAME	Elizabeth Brunner
STREET ADDRESS	4557 GARNET DR.	1.3 STREET ADDRESS	4712 Marine Parkway, 108-M
CITY-ST-ZIP	NEW PORT RICHEY FL	1.4 CITY-ST-ZIP	New Port Richey, Fl. - 34652
TITLE	P	2.1 TITLE	VP ☑ Change ☐ Addition
NAME	SCHNEPF, WERNER	2.2 NAME	David Rowley
STREET ADDRESS	4812 JASPER DR #102	2.3 STREET ADDRESS	4678 Marine Parkway, T#1-206
CITY-ST-ZIP	NEW PORT RICHEY FL	2.4 CITY-ST-ZIP	New Port Richey, Fl. - 34652
TITLE	T	3.1 TITLE	S ☑ Change ☐ Addition
NAME	LOWRIE, JAMES	3.2 NAME	Cloy B. Lee
STREET ADDRESS	4542 GARNET DR.	3.3 STREET ADDRESS	4533 Marine Parkway, V12-103
CITY-ST-ZIP	NEW PORT RICHEY FL	3.4 CITY-ST-ZIP	New Port Richey, Fl. - 34652
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	MANISCALCO, MANUEL	4.2 NAME	
STREET ADDRESS	4736 JASPER DR. #108	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW PORT RICHEY FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	T ☑ Change ☐ Addition
NAME	TADDA, HARRY	5.2 NAME	
STREET ADDRESS	4452 GARNET DR #101	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW PORT RICHEY FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	D ☐ Change ☑ Addition
NAME	KOEPKE, EDWIN	6.2 NAME	DUANE ROBU
STREET ADDRESS	4678 MARINE PKWY #202	6.3 STREET ADDRESS	4632 Marine Parkway, T#3-308
CITY-ST-ZIP	NEW PORT RICHEY FL	6.4 CITY-ST-ZIP	New Port Richey, Fl. - 34652

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Elizabeth Brunner
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR
Elizabeth Brunner, President
Date 1-18-1995
Daytime Phone # 813-848-0198

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