

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715807

1. Entity Name

GULF HARBORS CONDOMINIUM, INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90101 011 ****61.25

Principal Place of Business

Mailing Address

4909 MARINE PARKWAY
NEW PORT RICHEY FL 34652

4909 MARINE PARKWAY
NEW PORT RICHEY FL 34652-3531

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1613934

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WINTERBERGER, ROBERT W
4909 MARINE PARKWAY
NEW PORT RICHEY FL 34652

Name

MANISCALCO, MARY

Street Address (P.O. Box Number is Not Acceptable)

4909 MARINE PARKWAY

City

NEW PORT RICHEY

FL

Zip Code

34652

8. 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

Robert W. Winterberger

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-30-00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME WINTERBERGER, ROBERT W.
STREET ADDRESS 4901 ONYX LANE V5-203
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE SECRETARY ☐ Change ☒ Addition
NAME HARVEY, STEVEN
STREET ADDRESS 4632 MARINE PARKWAY, T#3-105
CITY-ST-ZIP NEW PORT RICHEY, FL. 34652

TITLE VPD ☐ Delete
NAME MANISCALCO, MARY
STREET ADDRESS 4636 JASPER DR, 108-0
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE PRESIDENT ☒ Change ☐ Addition
NAME MANISCALCO, MARY
STREET ADDRESS 4636 JASPER DR, 108-0
CITY-ST-ZIP NEW PORT RICHEY, FL. 34652

TITLE D ☒ Delete
NAME TADDA, HARRY
STREET ADDRESS 4452 GARNET DR T 6-101
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE TREASURER ☐ Change ☒ Addition
NAME KAFFKA, VALORIE
STREET ADDRESS 4533 MARINE PARKWAY, V12-101
CITY-ST-ZIP NEW PORT RICHEY, FL. 34652

TITLE D ☒ Delete
NAME VELLA, ANTHONY
STREET ADDRESS 4660 MARINE PARKWAY, T2-102
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE DIRECTOR ☐ Change ☒ Addition
NAME McLAUGHLIN, EDWARD
STREET ADDRESS 4854 MARINE PARKWAY, 201-C
CITY-ST-ZIP NEW PORT RICHEY, FL. 34652

TITLE DS ☐ Delete
NAME HUTSON, FRANK
STREET ADDRESS 4832 ONYX LANE, V3C
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 34652

TITLE D ☐ Delete
NAME MURPHY, JOSEPH
STREET ADDRESS 5142 TOPAZ LANE, E-203
CITY-ST-ZIP MEW PORT RICHEY FL 34652

TITLE DIRECTOR ☐ Change ☒ Addition
NAME O'SHEA, JOHN
STREET ADDRESS 4832 JASPER DRIVE, 204-D
CITY-ST-ZIP NEW PORT RICHEY, FL. 34652

12. I hereby certify that the information supplied with this filing 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:

Robert W. Winterberger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-00

Date

727-848-0198

Daytime Phone #

CR2E037 (9/99)