

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718946

FILED
Mar 31, 2010
Secretary of State

Entity Name: TOWN SHORES OF GULFPORT NO. 200, INC., A CONDOMINIUM

Current Principal Place of Business:

3210 59TH ST S
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

3210 59TH ST S
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 59-1367035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FATA, GREG
3210 59TH STREET SOUTH
GULFPORT,, FL 33707 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: PD
Name: KOSLOWSKI, JOHN
Address: 5840 30TH AVE. S. #301
City-St-Zip: GULFPORT, FL 33707

Title: VPD
Name: MALMSTEDT, DOROTHY
Address: 5840 30TH AVE. S. #310
City-St-Zip: GULFPORT, FL 33707

Title: TD
Name: STOVER, MARY
Address: 5840 30TH AVE S. #308
City-St-Zip: GULFPORT, FL 33707

Title: SD
Name: BOUCHER, BARBARA
Address: 5840 30TH AVE. S. #108
City-St-Zip: GULFPORT, FL 33707

Title: D
Name: FANNING, ROBERT
Address: 5840 30TH AVE. ST #315
City-St-Zip: GULFPORT, FL 33707

Title: D
Name: MARE, WESLEY
Address: 5840 30TH AVE. S. # 303
City-St-Zip: GULFPORT, FL 33707

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: JOHN KOSLOWSKI

PD

03/31/2010

Electronic Signature of Signing Officer or Director

Date