

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721662

FILED
Mar 31, 2010
Secretary of State

Entity Name: TOWN SHORES OF GULFPORT NO. 206, A CONDOMINIUM

Current Principal Place of Business:

3210 59TH STREET S.
BOX 416
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

3210 59TH STREET S.
BOX 416
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 59-1727795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FATA, GREGG
3210 59TH ST. S
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: AMES, CHARLES
Address: 5955 30TH AVE S #410
City-St-Zip: GULFPORT, FL

Title: VP
Name: PINEO, EARL
Address: 5955 30TH AVE S
City-St-Zip: GULFPORT, FL 33707

Title: TD
Name: VANDERWIEL, LORETTA
Address: 5955 30TH AVE S
City-St-Zip: GULFPORT, FL 33707

Title: SD
Name: SARKIS, JEAN
Address: 5955 30TH AVE S # 402
City-St-Zip: GULFPORT, FL 33707

Title: D
Name: DODGE, HUGH
Address: 5955 30TH AVE. S. #211
City-St-Zip: GULFPORT, FL 33707

Title: D
Name: WILKINSON, SALLY
Address: 5955 30TH AVE. S. #110
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: CHARLES AMES

PD

03/31/2010

Electronic Signature of Signing Officer or Director

Date