

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90167 006 ****61.25

DOCUMENT # 722619

1. Entity Name

FIFTY GULFSIDE CONDOMINIUM, INC.



Principal Place of Business

**50 GULF BLVD.
INDIAN ROCKS BCH FL 33785
US**

Mailing Address

**50 GULF BLVD.
INDIAN ROCKS BCH FL 33785
US**

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 **59-1577833**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WALDOCK, LOUIS
50 GULF BLVD
APT #112
INDIAN ROCKS BEACH FL 33785**

7. Name and Address of New Registered Agent

Name

FISCUS, RONALD

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

**50 GULF BLVD Unit 211
INDIAN ROCKS BEACH, FL**

City

FL

Zip Code

33785

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ronald A. Fiscus

RONALD A. FISCUS

4/6/03

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

(NOTE: Registered Agent signature required when reinstating)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	FISCUS, RONALD	
STREET ADDRESS	50 GULF BLVD UNIT 211	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FLEISCHER, LOUIS	
STREET ADDRESS	2522 CRAVEY DR.	
CITY-ST-ZIP	ATLANTA GA 30345	
TITLE	T	<input type="checkbox"/> Delete
NAME	DUNN, THOMAS	
STREET ADDRESS	7581 CUMBERLAND RD. #3	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WELLS, GINA	
STREET ADDRESS	1307 ESTATEWOOD DR.	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROSSITER, JOSEPH	
STREET ADDRESS	50 GULF BLVD. APT 113	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 otherlike empowered.

SIGNATURE:

Ronald A. Fiscus **RONALD A. FISCUS** **4/6/03** **7225952291**

CR2E037 (10/02)