2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State
02-18-2004 90002 038 ****61.25

DOCUMENT # 732695

1. Entity Name

GULFPLACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6700 GULF DRIVE HOLMES BEACH FL 34217	6700 GULF DRIVE HOLMES BEACH FL 34217

MOORE CR2E037 (11/03)

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 59-1669830 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WHITTAKER, JEFF
% PROFESSIONAL REALTY GROUP
2614 MANATEE AVENUE WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____
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
Due By May 1, 2004

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D DESMARAIS, ROGER 390 DE CHATEAUQUAY LONGUEUIL QUEBEC J4H 2K9 CN	☐ Delete	VD WADSWORTH, SUSIE 624 SOUTH RIDE TALLAHASSEE FL 32303	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MCARTHUR, DOROTHY 8805 ANNE TUCKER LANE ALEXANDRIA VA 22309	☐ Delete	PD RICHARDS, MIKE 655 SPRING VALLEY RD ANN ARBOR, MI 48105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WADSWORTH, SUSIE 624 SOUTH RIDE TALLAHASSEE FL 32303	☒ Delete	D GIVENS, ALVIN 12414 PEBBLEPOINTE PASS CARMEL, IN 46033	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YATROS, IRMA 14 N SECOND ST BATESVILLE IN 47006	☐ Delete	D WENTLAND, ARNOLD 5700 LINDA LANE GREENFIELD, MN 55373	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RICHARDS, MIKE 655 SPRING VALLEY RD ANN ARBOR MI 48105	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCARTHUR, STUART 8805 ANNE TUCKER LN ALEXANDRIA VA 22307	☐ Delete		☐ Change ☐ Addition

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: Jon M Richards 1-22-04 941 778 2105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #