2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 03, 2005 8:00 am Secretary of State

02-03-2005 90030 024 ****61.25

DOCUMENT # 732695 1. Entity Name GULFPLACE CONDOMINIUM ASSOCIATION, INC.				0.	2-03-2005 90	030 024 ****6	1.25	
6700 GULF DRIVE 670		Mailing Address 6700 GULF DRIVE HOLMES BEACH, FL 3421	00 GULF DRIVE		40011536			
2 Principal P	face of Business 3	. Mailing Address						
			····					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	buite, Apt. #, etc.		ig-NP C	R2E037 (10/03)		
City & State		City & State	City & State		0	<u> </u>	plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	\$8.75 Add		
	6. Name and Address of Current Reg	stered Agent		7. Name and Addi	ess of New Regis	stered Agent		
WHITTAKER, JEFF			Name	•				
% PROFESSIONAL REALTY GROUP 2614 MANATEE AVENUE WEST			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
BRADENTON, FL 34205			24	2425 Manatee Avenue West				
			City Br	City Bradenton, FL Zi34205				
the obligat	named entity submits this statement for the ions of registered agent.	purpose of changing its reg	istered office or re	gistered agent, or both, in	the State of Florida	a. I am familiar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and to	tle if applicable. (NOTE: Re	gistered Agent signature i	equired when reinstating)		DATE:	1.	
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaig Trust Fund Contr				Financing \$5.00 May Be Make check payable to				
10.	OFFICERS AND DIREC		11.	ADDITIONS/CHANGE	S TO OFFICERS			
NAME STREET ADDRESS CITY-ST-ZIP	D DESMARAIS, ROGER 390 DE CHATEAUQUAY LONGUEUIL QUEBEC J4H 2K9, CN	☐ Delete	NAME STREET ADDRESS	P,D Mike Richards 655 Spring Val Ann Arbor, MI		☐ Change	⊠ Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	ST MCARTHUR, DOROTHY 8805 ANNE TUCKER LANE ALEXANDRIA, VA 22309	☐ Delete	NAME STREET ADDRESS	VD Lynne Simpson 608 West Brado Alexandria, V	dock Road	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WADSWORTH, SUSIE -624:SOUTH:RIDE TALLAHASSEE, FL 32303	₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Yatros 14 North Seco Batesville, I		☐ Change	Addition	
TITLE NAME					<u> </u>			
STREET ADDRESS CITY-ST-ZIP	D YATROS, IRMA 14 N SECOND ST BATESVILLE, IN 47006	₩ Delete	NAME STREET ADDRESS	D Alvin Givens 12414 Pebblepo	oint Path	☐ Change	Addition	
STREET ADDRESS	YATROS, IRMA 14 N SECOND ST	Q Delete □ Delete	NAME STREET ADDRESS	D Alvin Givens	oint Path)33	☐ 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 statelemental 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 feceivar 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 signar address with all other like empowered.

SIGNATURE: