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

**FILED**
**Jan 15, 2003 8:00 am**
**Secretary of State**
01-15-2003 90306 041 ****61.25

DOCUMENT # 732695

1. Entity Name
GULFPLACE CONDOMINIUM ASSOCIATION, INC.

20008709

☐ CHECK HERE IF MAKING CHANGES

| Principal Place of Business | Mailing Address |
|---|---|
| 6700 GULF DRIVE<br>HOLMES BEACH FL 34217 | 6700 GULF DRIVE<br>HOLMES BEACH FL 34217 |

| 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**

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<br>DESMARAIS, ROGER<br>390 DE CHATEAUQUAY<br>LONGUEUIL QUEBEC J4H 2K9 CN | ☐ Delete | D<br>WEDTLAND, ARNOLD<br>5700 Lincia Lane<br>GREENFIELD, MN 55373 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ST<br>MCARTHUR, DOROTHY<br>8805 ANNE TUCKER LANE<br>ALEXANDRIA VA 22309 | ☐ Delete | D<br>SIMPSON, LYNNE<br>608 W. BRADDOCK RD.<br>ALEXANDRIA, VA 22302 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>WADSWORTH, SUSIE<br>624 SOUTH RIDE<br>TALLAHASSEE FL 32303 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>YATROS, IRMA<br>14 N SECOND ST<br>BATESVILLE IN 47006 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>RICHARDS, MIKE<br>655 SPRING VALLEY RD<br>ANN ARBOR MI 48105 | ☐ Delete | V/D<br>MIKE RICHARDS | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>MCARTHUR, STUART<br>8805 ANNE TUCKER LN<br>ALEXANDRIA VA 22307 | ☐ Delete | D<br>MCARTHUR, STUART | ☒ Change ☐ Addition |

CR2E037 (10/02)

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:** [signature] 1/10/2003 703-780-1176
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR