

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733447

FILED
Apr 27, 2009
Secretary of State

Entity Name: GULF HARBORS BEACH CLUB, INC.

Current Principal Place of Business:

5345 WEST SHORE DRIVE
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5345 WEST SHORE DRIVE
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-1651411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEYTON, DONALD R ESQ
PEYTON LAW FIRM, P.A.
7317 LITTLE RD
NEW PORT RICHEY, FL 34654 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: VD () Delete
Name: GEIGER, TERI
Address: 6116 BAYSIDE DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: PD () Delete
Name: LLEWELLYN, TOM
Address: 4340 SEAGULL DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD () Delete
Name: DETRANO, JOSEPH
Address: 3835 RUDDER WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: COVERT, BILL
Address: 5350 WINDWARD WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: HUBACH, SHERRI
Address: 4619 FLOAMAR TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD () Delete
Name: ARNOLD, ARLEEN
Address: 6233 SPOONBILL
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: TREAT, JUNE
Address: 6233 SPOONBILL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: HUBACH, SHERRI
Address: 4619 FLORAMAR TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: COVERT, BILL
Address: 5350 WINDWARD WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH DETRANO

TRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date