2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734928

FILED Apr 06, 2009 Secretary of State

Entity Name: GULF BEACH VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 711 TARPON BAY RD. SANIBEL, FL 33957 **Current Mailing Address: New Mailing Address:** ISLAND MANAGEMENT PO BOX 100 SANIBEL, FL 33957 PO BOX 100 SANIBEL, FL 33957 FEI Number: 59-1725721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MACKESY, STEVEN 711 TARPÓN BAY RD. SANIBEL, FL 33957 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BARTOK, PETER Name: Name: 321 W BURNAM ROAD Address: Address: City-St-Zip: COLUMBIA, MO 65203 City-St-Zip: Title: () Delete Title: VD (X) Change () Addition MANCUSO, TERESA Name: MANCUSO, TERESA Name: Address: 2704 N. RACINE AVE Address: 2704 N. RACINE AVE City-St-Zip: CHICAGO, IL 60614 City-St-Zip: CHICAGO, IL 60614 Title: () Delete Title: () Change () Addition GROSS, RICHARD Name: Name: 720 GLADSTONE AVENUE Address: Address: City-St-Zip: BALTIMORE, MD 21210 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition Name: VARSAM, GEORGE Name: VARSAM, GEORGE 28-07 157TH ST Address: 28-07 157TH ST Address: City-St-Zip: FLUSHING, NY 11354 City-St-Zip: FLUSHING, NY 11354 Title: () Delete Title: (X) Change () Addition REISBERG, BERNIE RELYEA, SARA Name: Name: 3921 CRYSTAL LAKE BLVD. 3810 PATRICIA DR Address: Address: City-St-Zip: MINNEAPOLIS, MN 55422 City-St-Zip: COLUMBUS, OH 43220

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: PETER BARTOK PD 04/06/2009