

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # 741894

1. Entity Name
GULF SOUTH CONDOMINIUM OF NAPLES, INC.



Principal Place of Business

1120-1140 5TH ST. SO
NAPLES, FL 34102

Mailing Address

P.O. BOX 1981
NAPLES, FL 34106



01172008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1803904

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAERTZ, JERE
1140 5TH ST. SOUTH
NAPLES, FL 34102

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IN THIS SPACE**

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

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MAERTZ, JERE
STREET ADDRESS	1140 5TH ST. SOUTH
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	SD
NAME	MONTGOMERY, ELIZAETH & GUY
STREET ADDRESS	4033 S GERMANY GT
CITY-ST-ZIP	LOUISVILLE, KY 40207
TITLE	TD
NAME	RATNER, WARREN
STREET ADDRESS	2038 MAYFAIR MCLEAN COURT
CITY-ST-ZIP	FALLS CHURCH, VA 22043
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Jere Maertz* Jere Maertz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-08 239-649-0137

Date

Daytime Phone #