

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747742

FILED
Jan 06, 2010
Secretary of State

Entity Name: GULFWATERS I, INC.

Current Principal Place of Business:

2702 BEACH TRAIL UNIT B
INDIAN ROCKS BEACH, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

2702 BEACH TRAIL UNIT B
INDIAN ROCKS BEACH, FL 33785 US

New Mailing Address:

FEI Number: 59-1988787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALAJCSIK, MICHAEL
2702 BEACH TRAIL UNIT D
INDIAN ROCKS BEACH, FL 33785 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: PD
Name: DONOVAN, PATRICIA G
Address: 2702 BEACH TRAIL UNIT C
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VD
Name: HALAJCSIK, MICHAEL
Address: 2702 BEACH TRAIL UNIT D
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: S
Name: HUSTON, FRANCES A
Address: 2702 BEACH TRAIL UNIT B
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: TD
Name: HUSTON, FRANCES A
Address: 2702 BEACH TRAIL UNIT B
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: CD
Name: HALAJCSIK, MICHAEL
Address: 2702 BEACH TRAIL UNIT D
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D
Name: BERGES, JEANNE
Address: 2702 BEACH TRAIL UNIT A
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby 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 all other like empowered.

SIGNATURE: FRANCES A HUSTON

S/TD

01/06/2010

Electronic Signature of Signing Officer or Director

Date