2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749679

FILED Apr 29, 2009 Secretary of State

Entity Name: GLOUCESTER D CONDOMINIUM ASSOCIATION, INC.

	020002	STER D'CONDOMINION AC	occiA ne	711, 1110.		
Current Principal Place of Business:				New Principal Place of Business:		
1904 CLUE	MANAGEME BHOUSE DR CENTER, FL					
Current Mailing Address:				New Mailing Address:		
STERLING MANAGEMENT INC 1701-B STERLING DRIVE SUN CITY CENTER, FL 33573				STERLING MANAGEMENT INC 1904 CLUBHOUSE DR SUN CITY CENTER, FL 33573		
FEI Number:	59-2046407	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LAW OFFICES OF JAMES R. DE FURIO, P.A. 201 EAST KENNEDY BOULEVARD SUITE 1460 TAMPA, FL 33602 US				WETHERINGTON, HAMILTON, HARRISON & FAIR PA 1010 N. FLORIDA AVE. TAMPA, FL 33602 US		
The above in the State		submits this statement for the	purpose o	f changing its register	red office or registered agent, or both,	
SIGNATURE: RONALD COTTERILL					04/29/2009	
	Electror	nic Signature of Registered A	gent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	SQUIRES, STA 421 GLADSTO			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LARAMEE, ATH 424 GLADSTO			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TUMULTY, JOH 415 GLADSTO			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KULINNA, TED 435 GLOUCES			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GEDDER, ROS 418 GLADESTO			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRIAN L. MAY MGR 04/29/2009