

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90319 024 ****61.25

DOCUMENT # 749680

1. Entity Name
GLOUCESTER F CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
1701-B RICKENBACKER DRIVE
SUN CITY CENTER, FL 33573-4351

Mailing Address
1701-B RICKENBACKER DRIVE
SUN CITY CENTER, FL 33573-4351

40071653



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01162006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2046609

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER & POLIAKOFF, P.A.
201 E KENNEDY BLVD STE 1460
TAMPA, FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME TURPIN, ALLEN ☐ Delete
STREET ADDRESS 2241 GREENWICH DR.
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE VPD ☐ Change ☒ Addition
NAME Munz, Donna
STREET ADDRESS 2245 Greenwich Dr.
CITY-ST-ZIP Sun City Center, FL 33573

TITLE SD ☐ Delete
NAME DOHERTY, ALF
STREET ADDRESS 2213 GREENWICH DR.
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME MATTEI, GUY
STREET ADDRESS 2219 GREENWICH DR.
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME MUNZ, DONNA
STREET ADDRESS 2245 GREENWICH DR.
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME TOMSCHE, JOHANN
STREET ADDRESS 2205 GREENWICH DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Allan F Turpin, ALLAN F. TURPIN

3-14-06

495-3768

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #