

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 749946

FILED
Oct 27, 2009
Secretary of State

Entity Name: GULF MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

AMERICAN CONDO MANAGEMENT, INC.
POST OFFICE BOX 100399
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 59-2238066 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KASE, SUSAN
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

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: SUSAN KASE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PEARSON, WILLIAM
Address: 1006 SE 46TH ST, #2B
City-St-Zip: CAPE CORAL, FL 33904

Title: STD () Delete
Name: SALANITRI, AMY
Address: 1234 6TH ST
City-St-Zip: WEST BABYLON, NY 11704

Title: P () Delete
Name: PUKALL, DONALD
Address: 1006 SE 46TH ST, #2D
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: KRIEGER, ROBERT
Address: 1006 SE 46TH ST, #2A
City-St-Zip: CAPE CORAL, FL 33904

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM PEARSON

PRES

10/27/2009

Electronic Signature of Signing Officer or Director

Date