

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90080 042 ****61.25

DOCUMENT # 752505

1. Entity Name
GLOUCESTER H CONDOMINIUM ASSOCIATION, INC.



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

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

40088459



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

S Sterling Management
1904 Clubhouse Drive

., etc.

01182008 Chg-NP CR2E037 (12/06)

C Sun City Center, FL 33573

te

4. FEI Number
59-2077238

Applied For
Not Applicable

Zip

Country

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

6. Name and Address of Current Registered Agent

LAW OFFICES OF JAMES R DE FURIO, PA
201 E KENNEDY BLVD
SUITE 1460
TAMPA, FL 33602

7. Name and Address of New Registered Agent

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, 2008**

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

TITLE PD ☐ Delete
NAME KOMST, CURTIS
STREET ADDRESS 2226 GREENHAVEN DR.
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE D ☐ Delete
NAME NORBECK, BETTY
STREET ADDRESS 2242 GREENHAVEN DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE SD ☐ Delete
NAME KOMST, YVONNE
STREET ADDRESS 2226 GREENHAVEN DRIVE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE VD ☐ Delete
NAME YAGER, EILEEN
STREET ADDRESS 2244 GREENHAVEN DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE TD ☐ Delete
NAME BISHOP, WILLIAM
STREET ADDRESS 2224 GREENHAVEN DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D. ☐ Change ☒ Addition
NAME Betty Norbeck
STREET ADDRESS 2242 Greenhaven Dr.
CITY-ST-ZIP Sun City Center, FL 33573

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

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

TITLE ☐ Change ☐ Addition
NAME
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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

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/05/08
Date

Daytime Phone #