

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754131

FILED
Mar 13, 2012
Secretary of State

Entity Name: GULF WINDS EAST OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2800 SCENIC GULF DR
DESTIN, FL 32550 US

New Principal Place of Business:

10221 EMERALD COAST PKWY. WEST
SUITE 23
MIRAMAR BEACH, FL 32550 US

Current Mailing Address:

10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

10221 EMERALD COAST PKWY. WEST
SUITE 23
MIRAMAR BEACH, FL 32550 US

FEI Number: 59-2069524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELDER, JAY B
10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550 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: D
Name: BLANCHARD, JAY
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: PD
Name: CHRISTIAN, TIM
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: D
Name: SCHRAMM, GLENN
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: SEC
Name: WELFARE, FAYE
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: TR
Name: KOEPKE, CARLA
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: D
Name: HALL, RANDALL
Address: 10221 EMERALD COAST PKWY. W, SUITE 23
City-St-Zip: MIRAMAR BEACH, FL 32550 US

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: TIM CHRISTIAN

PD

03/13/2012

Electronic Signature of Signing Officer or Director

Date