

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755263

FILED
Apr 16, 2009
Secretary of State

Entity Name: GULFSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9375 GULFSHORE DR
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

9375 GULFSHORE DR
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 59-2058404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALK, S TEVEN M
850 PARK SHORE DR
NAPLES, FL 34103 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: PD () Delete
Name: RILEY, JIM
Address: 415 WEST LANE
City-St-Zip: GENEVA, IL 60134

Title: VSD () Delete
Name: RILEY, JIM
Address: 415 WEST LANE
City-St-Zip: GENEVA, IL 60134

Title: TD () Delete
Name: KANE, NANCY
Address: 9375 GULFSHORE DR
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: BARTON, KAY
Address: 9375 GULFSHORE DRIVE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARTON, JAMES
Address: 9375 GULFSHORE DRIVE
City-St-Zip: NAPLES, FL 34108

Title: VSD (X) Change () Addition
Name: BARTON, JAMES
Address: 9375 GULFSHORE DRIVE
City-St-Zip: NAPLES, FL 34108

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

Title: SD (X) Change () Addition
Name: LUCE, JANET
Address: 9375 GULFSHORE DRIVE
City-St-Zip: NAPLES, FL 34108

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: JAMES BARTON

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date