

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755263

FILED  
Jan 07, 2012  
Secretary of State

**Entity Name:** GULFSIDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9375 GULFSHORE DR  
#202  
NAPLES, FL 34108 US

**New Principal Place of Business:**

9375 GULFSHORE DR  
NAPLES, FL 34108 US

**Current Mailing Address:**

9375 GULFSHORE DR  
NAPLES, FL 34108 US

**New Mailing Address:**

6305 WILSHIRE PINES CIRCLE #504  
NAPLES, FL 34109 US

**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  
Name: TOM, MEYER  
Address: 9375 GULFSHORE DRIVE  
City-St-Zip: NAPLES, FL 34108

Title: VSD  
Name: TOM, MEYER  
Address: 9375 GULFSHORE DRIVE  
City-St-Zip: NAPLES, FL 34108

Title: SD  
Name: WRIGHT, CAROL  
Address: 9375 GULFSHORE DR  
City-St-Zip: NAPLES, FL 34108

Title: TD  
Name: JIM, TOABE  
Address: 9375 GULFSHORE DRIVE  
City-St-Zip: NAPLES, FL 34108

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: TOM MEYER

PRES

01/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date