## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#756325** 

FILED Mar 31, 2009 Secretary of State

Entity Name: GULF SHORES CONDOMINIUM MOTEL, INC.

Current Principal Place of Business: New Principal Place of Business:

410 GULF BLVD

INDIAN ROCKS BEACH, FL 33785 US

Current Mailing Address: New Mailing Address:

C/O PROFESSIONAL CONDO CONCEPTS, INC. 2181 INDIAN ROCKS RD S. SUITE 1 LARGO, FL 33774 US

FEI Number: 59-2167636 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCONNELL, NICOLA J
2181 INDIAN ROCKS RD S
SUITE 1
LARGO, FL 33774 US

MCCONNELL, NICOLA
2181 INDIAN ROCKS RD S
SUITE 1
LARGO, FL 33774 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: NICOLA MC CONNELL 03/31/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change ()Addition

 Name:
 GOULD, TODD
 Name:

 Address:
 410 GULF BLVD
 Address:

 City-St-Zip:
 INDIAN ROCKS BEACH, FL 33785
 City-St-Zip:

Title: DVP ( ) Delete Title: VP/T (X) Change ( ) Addition

 Name:
 MYERS, CLIFF
 Name:
 DAUDELIN, LARRY

 Address:
 410 GULF BLVD
 Address:
 410 GULF BLVD

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: DST ( ) Delete Title: D/S (X) Change ( ) Addition

 Name:
 MCKENNA, GENE
 Name:
 WILSON, ANN

 Address:
 410 GULF BLVD
 Address:
 410 GULF BLVD.

Address: 410 GULF BLVD Address: 410 GULF BLVD.

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: TODD GOULD DP 03/31/2009