

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765058

FILED  
Apr 17, 2012  
Secretary of State

**Entity Name:** GULFSTREAM MANOR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3901 N. OCEAN BLVD.  
GULFSTREAM, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

4960 CONFERENCE WAY NORTH, STE. 100  
BOCA RATON, FL 33431 US

**New Mailing Address:**

**FEI Number:** 59-2132073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: S/D  
Name: KUNST, EDWARD  
Address: 14094 WINDEMERE DRIVE NW  
City-St-Zip: GRAND RAPIDS, MI 49534

Title: P  
Name: JOHNSON, ED  
Address: 1631 EMERALD COVE DR  
City-St-Zip: CAPE CORAL, FL 33991

Title: VP  
Name: WIRINGER, LINDA  
Address: 6151 NW 4TH AVE  
City-St-Zip: BOCA RATON, FL 33487

Title: D  
Name: SCHROEDER, KERRY  
Address: 5505 ERINVALLE COURT  
City-St-Zip: HOLLY SPRINGS, NC 27540

Title: D  
Name: JOZEPIAK, ALAN  
Address: 4960 CONFERENCE WAY NORTH, STE. 100  
City-St-Zip: BOCA RATON, FL 33431

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: ED JOHNSON

P

04/17/2012

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

\_\_\_\_\_  
Date