2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768391

FILED Mar 29, 2012 Secretary of State

Entity Name: YACHTSMANS COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

GSC,LLC D/B/A GULF SHORES CAM

% GULF SHORES CAM INC GSC,LLC D/B/A GULF SHORES CAM
76 PONDELLA RD SUITE 201 76 PONDELLA RD SUITE 201
NORTH FORT MYERS, FL 33903 US NORTH FORT MYERS, FL 33903 US

Current Mailing Address: New Mailing Address:

% GULF SHORES CAM INC GSC,LLC D/B/A GULF SHORES CAM 76 PONDELLA RD SUITE 201 76 PONDELLA RD SUITE 201

NORTH FORT MYERS, FL 33903 US NORTH FORT MYERS, FL 33903 US

FEI Number: 59-2489698 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:

LAPOSTA, RICHARD L CAM
76 PONDELLA RD STE 201
AXFORD, MARK
76 PONDELLA RD STE 201

NORTH FORT MYERS, FL 33903 US NORTH FORT MYERS, FL 33903 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: MARK AXFORD 03/29/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

Name: GROTH, GARY

Address: 15397-601 MOONRAKER CT. NE City-St-Zip: NORTH FORT MYERS, FL 33917

Title: VPD

Name: BECKMANN, FRED

Address: 15397 MOONRAKER CT NE #610 City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DT

Name: BONE, BILL

Address: 15370-103 TRANSIT CT NE City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D

Name: FOSS, JOAN

Address: 15397 MOONRAKER CT NE #603 City-St-Zip: NORTH FORT MYERS, FL 33917

Title: [

 Name:
 PAPRUKILLO, GARY

 Address:
 15371 TRANSIT CT NE #708

 City-St-Zip:
 NORTH FORT MYERS, FL 33917

Title: DS

Name: JOWSEY, LEN

Address: 15371 TRANSIT CT NE #706 City-St-Zip: NORTH FORT MYERS, FL 33917

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: GARY GROTH DP 03/29/2012