

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995



SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # H19789

(7)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY - 1 AM 10: 10

GULFWIND OF SARASOTA, INC.

1601 KEN THOMPSON PKWY
SARASOTA FL 34236

2005 N TAMiami TR
SARASOTA FL 34234
US

DO NOT WRITE IN THIS SPACE

2. Filing Date: 09/06/1984		3a. Date of Last Report: 05/01/1994	
21. 2005 N. TAMiami TR		4. FCI Number: 59-2451432	
22. SARASOTA, FL		5. Certificate of Status: \$8.75 Additional Fee Required	
23. 34234		6. Election Campaign Financing: \$5.00 May Be Added to Fees	
24. SARASOTA		7. The corporation is liable for ad valorem tax under Chapter 192, Florida Statutes: ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MARKS, GREGORY M. 720 S. ORANGE AVENUE SARASOTA FL 34236		81. Name 82. Street Address, P.O. Box Number and Apartment 83. 84. City, State, Zip	

11. I, the undersigned, certify that the information furnished on this form is true and correct, and that I am a resident of the State of Florida. I am the owner of the corporation, or I am authorized to act on behalf of the owner of the corporation for the purpose of filing this report. I am the owner of the corporation, or I am authorized to act on behalf of the owner of the corporation for the purpose of filing this report.

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	DP WHIPP, EUGENE M. 101 CITY ISLAND ROAD SARASOTA FL STD	NAME	
NAME	WHIPP, NORMA C. 101 CITY ISLAND ROAD SARASOTA FL	NAME	
NAME	PITSTICK, JOHN 101 CITY ISLAND ROAD SARASOTA FL	NAME	
NAME	PHILLIPS, DEANA R. 101 CITY ISLAND ROAD SARASOTA FL	NAME	

REMITTED BY MAY 1

14. I, the undersigned, certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption provided in Section 192.02(2)(b), Florida Statutes. I further certify that the information is correct and that the information is true and correct, and that I am a resident of the State of Florida. I am the owner of the corporation, or I am authorized to act on behalf of the owner of the corporation for the purpose of filing this report. I am the owner of the corporation, or I am authorized to act on behalf of the owner of the corporation for the purpose of filing this report.

SIGNATURE: *Norma C. Whipp*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/95