

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007979

FILED
Jan 06, 2009
Secretary of State

Entity Name: GULF HARBOUR MARINA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14490 VISTA RIVER DR
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

14490 VISTA RIVER DR
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 65-1153432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JOSEPH E ESQ.
14241 METROPOLIS AVE
SUITE 100
FT MYERS, FL 339120000 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 () Delete
Name: CROUCH, WILLIAM
Address: 11466 OSPREY LANDING WAY
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: INGRAHAM, JOHN D
Address: 11029 HARBOUR YACHT CT #201
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: CROUCH, BILL
Address: 11466 OSPREY LANDING WAY
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: CLEVELAND, NED
Address: 14280 ROYAL HARBOR CT #504
City-St-Zip: FORT MYERS, FL 33908

Title: S () Delete
Name: OSTROM, ROBERT
Address: 14773 OSPREY POINT DR
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: KELLEY, DAVID
Address: 11090 HARBOUR YACHT CT #54-B
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM CROUCH

PRES

01/06/2009

Electronic Signature of Signing Officer or Director

Date