2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008823

FILED Apr 07, 2008 Secretary of State

Entity Name: GULFSIDE COTTAGES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: GULFSIDE WAY MIRAMAR BEACH, FL 32550			New Princ	New Principal Place of Business:		
Current Mailing Address:			New Maili	New Mailing Address:		
10221 EMERALD COAST PKWY WEST SUITE 23 MIRAMAR BEACH, FL 32550						
FEI Number:	26-0007337	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:	
SUITE 23 MIRAMAR The above	BEACH, FL named entity of Florida.		urpose of changing i	its registered	office or registered agent, or both,	
Electronic Signature of Registered Agent			ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TD (WAITES, CHA 1707 WELLIN BIRMINGHAM	IGTON RD.	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (BREMER, SU- 5732 CHESTN BIRMINGHAM	IUT TRACE	Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD (SMITH, RUST 120 WIMBER TRUSSVILLE,	LY DRIVE	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	MURRAY, SY 32 GULFSIDE		Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (LEWIN, JAN 325 RIVOLI C ATLANTA, GA		Title: Name: Address: City-St-Zip:	D (SERTICH, LE 9500 SCOTT ROSWELL, G	RD.	

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: SUSAN BREMER PD 04/07/2008