

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01612

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE GALLEON RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

617 FRONT STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

617 FRONT STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 59-2512207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LETSCHERT, TRUDO
1510 S. TUTTLE AVE.
SARASOTA, FL 34239 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: P () Delete
Name: MASTENBROEK, HENK
Address: 1510 S. TUTTLE AVE.
City-St-Zip: SARASOTA, FL

Title: VSD () Delete
Name: LETSCHERT, TRUDO
Address: 1510 S TUTTLE AVENUE
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: WRIGHT, BARBARA
Address: 30 SAILFISH PT
City-St-Zip: MANTEO, NC 27954

Title: DVT () Delete
Name: SMITH, ROY B
Address: 1510 S TUTTLE AVENUE
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: SPRAGUE, MARY JANE
Address: 6277 BARNSIDE DRIVE
City-St-Zip: CANAL WINCHESTER, OH

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:

Title: T (X) Change () Addition
Name: SMITH, ROY B
Address: 1510 S TUTTLE AVENUE
City-St-Zip: SARASOTA, FL

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: TRUDO LETSCHERT

VSD

04/17/2009

Electronic Signature of Signing Officer or Director

Date