

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90053 035 \*\*\*\*61.25

**DOCUMENT # N02000001820**

1. Entity Name  
**GULF CREST CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**8715 SURF DRIVE  
PANAMA CITY BEACH, FL 32408**

Mailing Address  
**8715 SURF DRIVE  
PANAMA CITY BEACH, FL 32408**

40016890



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02132007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**06-1681371**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**HESS, BRIAN D  
9108 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32407**

## 7. Name and Address of New Registered Agent

Name **JACK G. WILLIAMS**  
Street Address (P.O. Box Numbers Not Acceptable) **502 HARMON AVE**  
**PANAMA CITY, FL 32408**  
City **PANAMA CITY** FL **32402**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **BRUM, JOE**  
STREET ADDRESS **8715 SURF DRIVE # 601**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE **VP** ☐ Delete  
NAME **THOMAS, LARRY**  
STREET ADDRESS **7115 THOMAS DRIVE #1901**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE **SD** ☐ Delete  
NAME **DIPIETRO, JOE**  
STREET ADDRESS **10719 FRONT BEACH ROAD #305**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32407**

TITLE **T** ☐ Delete  
NAME **YOUNG, PEGGY**  
STREET ADDRESS **8715 SURF DRIVE #2007**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE **D** ☒ Delete  
NAME **ANTE, MARK J**  
STREET ADDRESS **8715 THOMAS DRIVE #1701**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition  
NAME **LARRY THOMAS**  
STREET ADDRESS **7115 THOMAS DR #1901**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE **VP** ☒ Change ☐ Addition  
NAME **JOE DIPIETRO**  
STREET ADDRESS **10719 FRONT BEACH RD.**  
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32407**

TITLE **SEC** ☒ Change ☒ Addition  
NAME **GENE SMITH**  
STREET ADDRESS **8715 SURF DR #606**  
CITY-ST-ZIP **PCB, FL 32408**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☐ Addition  
NAME **BRUM, JOE**  
STREET ADDRESS **8715 SURF DR #601**  
CITY-ST-ZIP **PCB, FL 32408**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/07

Date

Daytime Phone #

850-233-9367