

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003674

FILED
Jan 26, 2009
Secretary of State

Entity Name: GULFVIEW VILLAS OF HOLMES BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

413 PINE AVE
ANNA MARIE, FL

New Principal Place of Business:

5392 GULF DR.
HOLMES BEACH, FL 34217

Current Mailing Address:

P.O. BOX 1344
ANNA MARIA, FL 34216

New Mailing Address:

FEI Number: 03-0510920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIMBALL, MARK L
413 PINE AVE
ANNA MARIA, FL 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: KIMBALL, MARK L
Address: 413 PINE AVE
City-St-Zip: ANNA MARIE, FL

Title: D () Delete
Name: PRUETT, SANDEE
Address: 413 PINE AVE
City-St-Zip: ANNA MARIE, FL

Title: D () Delete
Name: BRYANT, JANICE
Address: 2409 PALM AVE
City-St-Zip: MANHATTAN BEACH, CA 90266

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:

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: MARK KIMBALL

PD

01/26/2009

Electronic Signature of Signing Officer or Director

Date