

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02287

FILED
Apr 21, 2009
Secretary of State

Entity Name: GULF HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT SRVS., OF SW FL, LLC
8910 TERRENE CT STE 200
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC
8910 TERRENE CT., STE 200
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

%GULF BREEZE MGMT SRVS., OF SW FL, LLC
8910 TERRENE CT STE 200
BONITA SPRINGS, FL 34135 US

New Mailing Address:

%GULF BREEZE MGMT. SVCS. OF SW FL, LLC
8910 TERRENE CT., STE 200
BONITA SPRINGS, FL 34135 US

FEI Number: 59-2551070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MGMT SRVS., OF SW FL, LLC
8910 TERRENE CT STE 200
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MGMT SVCS. OF SW FL, LLC
8910 TERRENE CT., STE 200
BONITA SPRINGS, FL 34135 US

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:

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: BACHMAN, BARBARA
Address: 25875 HICKORY BLVD. #401
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TD () Delete
Name: HOLLERAN, CATHIE JO
Address: 25875 HICKORY BLVD., #501
City-St-Zip: BONITA SPRINGS, FL 34134

Title: P () Delete
Name: ROGERS, NORMAN E JR.
Address: 7 CHURCH STREET NORTH
City-St-Zip: NEW HARTFORD, CT 06057

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: BACHMAN, BARBARA
Address: 25875 HICKORY BLVD., #401
City-St-Zip: BONITA SPRINGS, FL 34134

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

Title: PD (X) Change () Addition
Name: ROGERS, NORMAN E JR.
Address: 25875 HICKORY BLVD., #301
City-St-Zip: BONITA SPRINGS, FL 34134

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: NORMAN E. ROGERS, JR.

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date