

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002736

FILED  
Feb 28, 2011  
Secretary of State

Entity Name: G.B.S. CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

27299 RIVERVIEW CENTER BLVD  
102  
BONITA SPRINGS, FL 34134

## New Principal Place of Business:

28100 BONITA GRANDE DR  
104  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

27299 RIVERVIEW CENTER BLVD  
102  
BONITA SPRINGS, FL 34134

## New Mailing Address:

28100 BONITA GRANDE DR  
104  
BONITA SPRINGS, FL 34135

FEI Number: 45-0508749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARLIN, SARA E CAM  
27299 RIVERVIEW CENTER BLVD.  
102  
BONITA SPRINGS, FL 34134 US

## Name and Address of New Registered Agent:

CARLIN, SARA E CAM  
28100 BONITA GRANDE DR.  
104  
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: SARA CARLIN

02/28/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: LAVELLE, LAURA  
Address: 28100 BONITA GRANDE. #104  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP  
Name: SCHLAYER, PEGGY  
Address: 28100 BONITA GRANDE. #104  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: T  
Name: HANDFIELD, JOHN  
Address: 28100 BONITA GRANDE. #104  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: S  
Name: CERAMI, JOHN  
Address: 28100 BONITA GRANDE. #104  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: D  
Name: CORCORAN, WILLIAM  
Address: 28100 BONITA GRANDE. #104  
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby 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 all other like empowered.

SIGNATURE: SARA CARLIN

CAM

02/28/2011

Electronic Signature of Signing Officer or Director

Date