

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90016 024 ****61.25

DOCUMENT # N04000001825

1. Entity Name
**GIMPY GULCH PROPERTY OWNERS' ASSOCIATION,
INC.**



Principal Place of Business
**RICHARD L. BARNES
101 ORANGE LANE
ISLAMORADA, FL 33036-3012**

Mailing Address
**RICHARD L. BARNES
101 ORANGE LANE
ISLAMORADA, FL 33036-3012**

40048653



DO NOT WRITE IN THIS SPACE

02152008 No Chg-NP CR2E037 (4/06)

4. FEI Number
57-1208307

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JABRO, JOHN A
90311 OVERSEAS HWY
STE B
TAVERNIER, FL 33070**

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IN THIS SPACE**

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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LABARTA, LARRY
STREET ADDRESS	707 N.W. 7TH AVE
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	D
NAME	COOPER, JAYCE
STREET ADDRESS	205 JOHNNY CAKE DRIVE
CITY-ST-ZIP	NAPLES, FL 34110
TITLE	PT
NAME	BARNES, RICHARD
STREET ADDRESS	101 ORANGE LN
CITY-ST-ZIP	ISLAMORADA, FL 33036
TITLE	S
NAME	FINK SHAW, NANCY HOPE
STREET ADDRESS	140 GIMPY GULCH
CITY-ST-ZIP	ISLAMORADA, FL 33036
TITLE	D
NAME	WELLS, MILLARD
STREET ADDRESS	P.O. BOX 152
CITY-ST-ZIP	ISLAMORADA, FL 33036
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: R. L. Barnes **R. L. BARNES, PRES.** 03-13-08 305-852-3044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #