

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006060

FILED  
Sep 03, 2008  
Secretary of State

**Entity Name:** GULFSTREAM CENTER COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3155 S ACCESS ROAD STE A-C  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

5098 SEAGRASS DRIVE  
VENICE, FL 34293

**Current Mailing Address:**

3155 S ACCESS ROAD STE A-C  
ENGLEWOOD, FL 34224

**New Mailing Address:**

PO BOX 5334  
ENGLEWOOD, FL 34224 US

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GRANICZ, ROBERT T  
3155 S ACCESS ROAD STE A-C  
ENGLEWOOD, FL 34224 US

**Name and Address of New Registered Agent:**

GRANICZ, ROBERT T  
5098 SEAGRASS DRIVE  
VENICE, FL 34293 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:

09/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GRANCIZ, ROBERT T  
Address: PO BOX 5334  
City-St-Zip: ENGLEWOOD, FL 342240334

Title: D (X) Delete  
Name: SODERQUIST, CHARLES E  
Address: PO BOX 5334  
City-St-Zip: ENGLEWOOD, FL 342240334

Title: D ( ) Delete  
Name: WELDER, JIM  
Address: 8850 TAMiami TRAIL NORTH  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: DAUL, LEIGH  
Address: 8850 TAMiami TRAIL NORTH  
City-St-Zip: NAPLES, FL 34108

**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:

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: ROBERT GRANICZ

D

09/03/2008

Electronic Signature of Signing Officer or Director

Date