

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07973

FILED
Apr 30, 2009
Secretary of State

Entity Name: GULFSIDE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5800 OVERSEAS HWY
MARATHON, FL 33050 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 500224
MARATHON, FL 33050 US

New Mailing Address:

FEI Number: 59-2778194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKY ORR
5800 OVERSEAS HWY STE 19
MARATHON, FL 33050 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: P () Delete
Name: NARDONE, PAULA
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: D () Delete
Name: MORATO, MARLENE
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: VP () Delete
Name: FOWLER, BRIGID
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: T () Delete
Name: HOWARD, JAN
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: D (X) Delete
Name: BRIGGLE, JOHN
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NARDONE, PAULA
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: TRES (X) Change () Addition
Name: MORATO, MARLENE
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

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

Title: SEC (X) Change () Addition
Name: BRIGGLE, JOHN
Address: 5800 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

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: PAULA NARDONE

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date