

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08716

FILED
Apr 08, 2010
Secretary of State

Entity Name: GULF HARBOUR MASTER ASSOCIATION, INC.

Current Principal Place of Business:

15000 MCGREGOR BLVD.
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15751 SAN CARLOS BLVD #8
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 59-2579370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D. G. SUITOR & ASSOC. INC.
15751 SAN CARLOS BLVD #8
FORT MYERS, FL 33908 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: VP
Name: TEBBETTS, CHUCK
Address: 14344 HARBOUR LINKS COURT #5B
City-St-Zip: FORT MYERS, FL 33908

Title: P
Name: CUSTER, GENE
Address: 11471 WELLFLEET DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: T
Name: LONG, ROBERT
Address: 15042 TAMARIND CAY COURT #508
City-St-Zip: FORT MYERS, FL 33908

Title: S
Name: MAXIM, BARBARA
Address: 11430 OSPREY LANDING WAY
City-St-Zip: FORT MYERS, FL 33908

Title: D
Name: MONDERER, DAVID
Address: 11260 BIENVENIDA WAY #201
City-St-Zip: FORT MYERS, FL 33908

Title: D
Name: ROBERTS, DOUG
Address: 11130 HARBOUR YACHT CT. #12E
City-St-Zip: FORT MYERS, FL 33908

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: C.R. MIDDLETON

MGR

04/08/2010

Electronic Signature of Signing Officer or Director

Date