


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 01, 2007 8:00 am**  
**Secretary of State**

03-01-2007 90017 028 \*\*\*\*61.25

<b>DOCUMENT # N08968</b>			
1. Entity Name <b>GULF CREST HOME OWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>6985 SEMINOLE BLVD., #69 #69A SEMINOLE FL 34642</b>		Mailing Address <b>6985 SEMINOLE BLVD., #69 #69A SEMINOLE FL 34642</b>	
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc. <input checked="" type="checkbox"/>		3. Mailing Address  Suite, Apt. #, etc.	
City & State  Zip Country		City & State  Zip Country	
4. FEI Number <b>59-2642393</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KEITH, TALBOTT 6985 SEMINOLE BLVD LOT 6 SEMINOLE FL 33772</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-issuing)</small> DATE _____			

1st MOORE CR2E037 (10/06)



<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BM MUNTZ, CHARLES 6985 SEMINOLE BLVD #80 SEMINOLE FL 33772 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD NEISWINGER, DOYLYN 6985 SEMINOLE BLVD., LOT 78 SEMINOLE FL 33772 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D NICK D'ARCANGELO 6985 SEMINOLE BLVD LOT #60 SEMINOLE FL 33772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LOUISO, ROBERT 6985 SEMINOLE BLVD. #50 SEMINOLE FL 33772 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TALBOTT, KEITH 6985 SEMINOLE BLVD #06 SEMINOLE FL 33772 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D L'ABBE, CAROL 6985 SEMINOLE BLVD. #13 SEMINOLE FL 33772 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DONALD WAGNER 6985 SEMINOLE BLVD LOT # 59 SEMINOLE FL 33772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NEWKIRK, LINDA 6985 SEMINOLE BLVD. #46 SEMINOLE FL 33772 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** *Keith Talbott* **FEB 21, 2007** **727-641-1218**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #