

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15015

FILED
Jan 05, 2009
Secretary of State

Entity Name: THE GABLES OF VERO BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4007 N. HIGHWAY A1A
FORT PIERCE, FL 34949 US

New Principal Place of Business:

Current Mailing Address:

4007 N. HIGHWAY A1A
FORT PIERCE, FL 34949 US

New Mailing Address:

FEI Number: 59-2785314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLITT PROPERTY MANAGEMENT
4007 N. HIGHWAY A1A
FORT PIERCE, FL 34949 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: AGUILA, LOUIS
Address: 2700 OCEAN DRIVE #307
City-St-Zip: VERO BEACH, FL 32963

Title: S (X) Delete
Name: LITMORE, NELCH
Address: 833 LAKE ORCHID CIR
City-St-Zip: VERO BEACH, FL 32962

Title: T () Delete
Name: BREIEL, WILSON
Address: 2700 OCEAN DR., #501 A
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Delete
Name: LULSON, BREIEL
Address: 2700 OCEAN DR #501A
City-St-Zip: VERO BEACH, FL 32963

Title: P () Delete
Name: FRIEDRICH, PETER
Address: 2700 OCEAN DR #202
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Delete
Name: FRIEDRICH, PETER
Address: 2700 OCEAN DRIVE 202
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AQUILA, LOUIS
Address: 2700 OCEAN DRIVE #307
City-St-Zip: VERO BEACH, FL 32963

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: S (X) Change () Addition
Name: FRIEDRICH, PETER
Address: 2700 OCEAN DR #202
City-St-Zip: VERO BEACH, FL 32963

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: LOIUS AQUILA

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date