

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18191

FILED
Apr 30, 2007
Secretary of State

Entity Name: GULFVIEW ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1162 INDIAN HILLS BLVD.
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

1162 INDIAN HILLS BLVD.
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 59-2662771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEYS-CALDWELL, INC
1162 INDIAN HILLS BLVD.
VENICE, FL 34293 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: VD () Delete
Name: BISSON, FRANCES
Address: 1420 ROOSEVELT DR
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: GRIMM, TROY
Address: 1312 ROOSEVELT DR
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: MONTANARI, WILLIAM
Address: 5854 JACKSON LN
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: BOLSAN, ALISON
Address: 1432 ROOSEVELT DR
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: BISSON, FRANCIS
Address: 1420 ROOSEVELT DR.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SUSSMAN, EUGENE
Address: 5891 MADISON ROAD
City-St-Zip: VENICE, FL 34293

Title: SD (X) Change () Addition
Name: DILLARD, BRITT
Address: 5880 MONROE ROAD
City-St-Zip: VENICE, FL 34293

Title: TD (X) Change () Addition
Name: NOVAK, WILLIAM
Address: 1434 ROOSEVELT DRIVE
City-St-Zip: VENICE, FL 34293

Title: PD (X) Change () Addition
Name: BELSAN, ALISON
Address: 1432 ROOSEVELT DR
City-St-Zip: VENICE, FL 34293

Title: D (X) Change () Addition
Name: COPES, KEN
Address: 5828 LINCOLN ROAD
City-St-Zip: VENICE, FL 34293

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: BRITT DILLARD

SD

04/30/2007

Electronic Signature of Signing Officer or Director

Date