

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24564

FILED  
Apr 10, 2009  
Secretary of State

**Entity Name:** GULFPOINTE II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12690 OVERSEAS HIGHWAY  
MARATHON, FL 33050

**New Principal Place of Business:**

**Current Mailing Address:**

12690 OVERSEAS HWY.  
BOX 111  
MARATHON, FL 33050

**New Mailing Address:**

12690 OVERSEAS HWY.  
BOX 64  
MARATHON, FL 33050

**FEI Number:** 65-0108256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARSICK, SUSAN  
12690 OVERSEAS HIGHWAY  
BOX 64  
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: PD ( ) Delete  
Name: SALTIEL, ALAN  
Address: 12690 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

Title: VD ( ) Delete  
Name: MORRIS, ALAIN  
Address: 12690 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

Title: TD ( ) Delete  
Name: MARSICK, SUSAN  
Address: 12690 OVERSEAS HWY BX 64  
City-St-Zip: MARATHON, FL 33050

Title: D (X) Delete  
Name: PETERMAN, KEN  
Address: 12690 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MARSICK, JOHN  
Address: 12690 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

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

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

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: SUSAN MARSICK

TD

04/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date