FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMEN I # N26605 (8)							
GULF SIDE VILLA CONDOMINIUM ASSOCIATION, INC.							
GULF	OIUE VILI	LA CUNDUMINI	IUM ASSUCIATION,	INC			F NOVINOU DIE HATE UNIO TUNA ABSOLONIA UNIO ALON ALON OLON ELON ALON ALON
Principal Plac	e of Busines	8	Mailing Address	Mailing Address			
14259 PERIDID	V KEA UDING	•	LASCO DEDINION I	14259 PERDIDO KEY DRIVE			A Date 1
STE #2-B	O KET DAITE	•	STE #2-B				3. Date Incorporated or Qualified
PENSACOLA FI	L 32507			PENSACOLA FL 32507			05/25/1988 4. FEI Number Applied For
US			US	US			59-2907828 Not Applicable
2. Principal P	lace of Busin	ness	2a. Mailing Addr	2a. Mailing Address			\$9.7E Additional
21			26	26			Certificate of Status Desired Section
Suite, Apt.	#, etc.		Suite, Apt. #	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22			27				Trust Fund Contribution Added to Fees
City & Stat	е		— <u> </u>	City & State			7. Is this nonprofit corporation a homeowners association?
Zip		Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible
24	25		29	<u> </u>			Personal Property Tax due June 30. Yes No
	9, Name		rrent Registered Agent				10. Name and Address of New Registered Agent
81 Name							
HOLLAND, JOEL						Street Add	dress (P.O. Box Number is Not Acceptable)
14259 PERDIDO KEY DR., 1A					82		
PENSACOLA FL 32507					83		
					84 City 85 Zip Code		
							FL 2 2000
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
agent. I a	m familiar wi	ith, and accept the o	bligations of, Section 617.	.0503, Florida	Statutes	3.	• • • • • • •
SIGNATURE .	Signature based	for printed name of registers	rd agent and title if applicable.	(NOTE: Bo	olstered Ana	of elemeters reco	ulrad when reinstailing) DATE
12.	o.g. and o.g. typob		AND DIRECTORS		13.	organization	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	S		□ Di	LETE	1.1 TITLE		☐ Change ☐ Addition
NAME	(Cultivide), (Court				1.2 NAME		
STREET ADDRESS 15 BRENT LANE, #6-239				1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP					1.4 CITY-ST-ZIP		
MILE	PD	10 1051	L_ U	ELETE	2.1 TITLE		☐ Change ☐ Addition
NAME		ND, JOEL	44	2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS 14259 PERDIDO KEY DR., 1A CITY-ST-ZIP PENSACOLA FL			, 1A	=			•
CITY-ST-ZIP TITLE				DELETE 3.1 71		ST-ZIP	Change Addition
NAME	TOWNSEND, CHRIS				3.2 NAME		- 100mm
STREET ADDRESS					3.3 STREET	ADDRESS	
CITY-ST-ZIP		COLA FL	= : =		3.4. CITY - S		
TITLE	1		☐ DI	LETE	4.1 TITLE		Change Addition
NAME		is, robert			4. 2 NAME	ļ	
STREET ADDRESS 14259 PERDIDO KEY DR #1D			#1 D	4.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	PENSAC	COLA FL			4.4 CITY-S	T-ZIP	
TITLE			□ Di	LETE	5.1 TITLE		Change Addition
NAME				ľ	5.2 NAME		
STREET ADDRESS					5.3 STREET	1	
CITY-S1-ZIP			□ Di	FETE	5.4 CITY-S	T-ZIP	Change Addition
TITLE			LI VI	LCTE	6.1 TITLE		Change Accounts
NAME STREET ADDRESS	_				6.2 NAME 6.3 STREET	ADDOCCC	
CITY-ST-ZIP					6.4 CITY-S		
	· · ·	d information aumplic	ad with this filing does not	qualify for th			n Section 119.07(3)(i), Florida Statutes. I further certify that the information