

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31912

FILED
Feb 12, 2009
Secretary of State

Entity Name: GULF GATE GLEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O MARIE ANDERSON
3280 GULF WATCH CT
SARASOTA, FL 34231 US

New Principal Place of Business:

C/O KAYE FRANCIS
3281 GULF WATCH CT
SARASOTA, FL 34231 US

Current Mailing Address:

P.O. BOX 21681
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 65-0148086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, MARIE
3280 GULF WATCH CT
SARASOTA, FL 34231 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: SD () Delete
Name: JOHNSON, KAREN
Address: 3305 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

Title: VD () Delete
Name: ANDERSON, MARIE
Address: 3280 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: FRANCIS, KAYE
Address: 3281 GULF WATCH CT.
City-St-Zip: SARASOTA, FL 34231

Title: SD () Delete
Name: JOHNSON, KAREN
Address: 3305 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: FRANCIS, KAYE
Address: 3281 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

Title: PD (X) Delete
Name: ANDERSON, MARIE
Address: 3280 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: ANDERSON, MARIE
Address: 3280 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

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

Title: VD (X) Change () Addition
Name: DEVITO I, ELAINE
Address: 3273 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change () Addition
Name: SUTPHIN, BRANDEE
Address: 3288 GULF WATCH CT
City-St-Zip: SARASOTA, FL 34231

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: KAYE FRANCIS

TREA

02/12/2009

Electronic Signature of Signing Officer or Director

Date