

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40924

FILED
Jan 12, 2009
Secretary of State

Entity Name: GULFSIDE BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

671 NAUTILUS CT.
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

671 NAUTILUS CT.
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 59-2850442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, SHOREY & ASSOCIATES
43 MIRACLE STRIP PKWY
FORT WALTON BEACH, FL 32548 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: PTD () Delete
Name: QUIGLEY, MICHAEL
Address: 671 NAUTILUS COURT, #401
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD () Delete
Name: CALDARELLI, STEVE
Address: 671 NAUTILUS CT #501
City-St-Zip: FT WALTON BCH, FL 32548

Title: VD () Delete
Name: FEDONCZAK, TERRI W
Address: 127 WEST JOHN SIMS PARKWAY
City-St-Zip: VALPARAISO, FL 32580

Title: D (X) Delete
Name: WILKEY, BARBARA
Address: 7272 MOUNTAIN ASH
City-St-Zip: MEMPHIS, TN 38125

Title: D (X) Delete
Name: BLECKIN, ROBERT
Address: 355 CARAWAY COVE
City-St-Zip: MEMPHIS, TN 38117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () 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: RON SHOREY

MGR

01/12/2009

Electronic Signature of Signing Officer or Director

Date