2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State
04-02-2002 90903 046 ****61.25

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DOCUMENT # N44222

1. Entity Name

GULF SHORES NORTH PROPERTY OWNERS ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
430 W. 4TH STREET BOCA GRANDE FL 33921 US	P.O.BOX 1648 BOCA GRANDE FL 33921 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5800 GASPARILLA RD #C7	
Suite, Apt. #, etc.: P.O.BOX 1648	Suite, Apt. #, etc.
City & State: BOCA GRANDE FL	City & State
Zip: 33921 Country: US	Zip Country

4. FEI Number 22-3124770 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPURGEON, MARK A 430 W. 4TH ST. BOCA GRANDE FL 33921	Name: MADSEN, THOMAS Street Address (P.O. Box Number is Not Acceptable): 576 ROTONDA CIRCLE City: ROTONDA FL Zip Code: 33947

8. 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: THOMAS C. MADSEN, MANAGER 3/27/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD YOUNG, ROBERT A 16501 GULF SHORES DR BOCA GRANDE FL 33921	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BOOMER, ROBERT E P.O. BOX 424 BOCA GRANDE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SNARE, WILLIAM D 300 CIERMONT ST. DEVER CO	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALEY, LINDA P O BOX 102 BOCA GRANDE FL 33921	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALAN, WILLIAMS 5700 GULF SHORES DR BOCA GRANDE FL 33921	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LYMAN RANDALL P.O. BOX 1541 BOCA GRANDE, FL 33921	☐ Change ☒ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] Asst Secretary 3/27/02 941-964-0863
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #