

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44222

FILED
Apr 11, 2012
Secretary of State

Entity Name: GULF SHORES NORTH PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3899 CAPE HAZE DR
ROTONDA WEST, FL 33947 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 375
PLACIDA, FL 33946 US

New Mailing Address:

FEI Number: 22-3124770 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BRANDENBERGER, JOHN
3899 CAPE HAZE DRIVE
ROTONDA WEST, FL 33947 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: STD
Name: ANDERSON, YVONNE
Address: P.O. BOX 515
City-St-Zip: BOCA GRANDE, FL 33921

Title: D
Name: DEDRICK, JOHN R
Address: PO BOX 1975
City-St-Zip: BOCA GRANDE, FL 33921

Title: PD
Name: JENKINS, BARBARA
Address: P.O. BOX 2028
City-St-Zip: BOCA GRANDE, FL 33921

Title: VPD
Name: KLINGES, DAVE
Address: P.O. BOX 729
City-St-Zip: BOCA GRANDE, FL 33921

Title: D
Name: KUNKLER, WILLIAM
Address: P.O. BOX 1903
City-St-Zip: BOCA GRANDE, FL 33921

Title: D
Name: MOENNING, JOHN
Address: P.O. BOX 754
City-St-Zip: BOCA GRANDE, FL 33921

I hereby 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 all other like empowered.

SIGNATURE: BARBARA JENKINS

PD

04/11/2012

Electronic Signature of Signing Officer or Director

Date