## 2007 NOT-FOR-PROFIT CORPORATION

## FILED Jul 12, 2007 8:00 am Secretary of State

ANNUAL REPORT	
DOCUMENT # N44299	

SIGNATURE:

1. Entity Name GULF CLARIDGE APARTMENT ASSOCIATION, INC.							07-12-200°	7 90054 02	23 ****61	.25		
6767 SUNSE # 301	Principal Place of Business 6767 SUNSET WAY 251 S. ISLE DR 4 301 SAINT PETERSBURG BEACH, FL 33706							)	NAIN ANDNA NISTR (BN)1	1 (1811   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1	9k 818H 818N 81	1
2. Principal Place of Business - No P.O. Box # 3. Mailing Address CO CVT M6 M7					MT	5RV	c				SI KIN LIN H	
Suite, Apt. #, etc.			251 S. ISLE DR				07032007	Chg-NP	CR2E0	37 (12/06)		
City & State			ST PETE BEACH					4. FEI Number 59-2259				pplied For ot Applicable
Zip		Country	Zip 33	706	Cou	us A		5. Certificate of	f Status Desire	d 🗆	\$8.75 Ad- Fee Require	
	6. Name	and Address of Current	Registered	Agent				7. Name and A	Address of Nev	w Registered	Agent	
GERMAN, 251 S. ISLI		o w				Name						
		RG, FL 33706				Street Address (P.O. Box Number is Not Acceptable)						
						City				FL	Zip Coo	ie
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. 1 am familiar with, and accept the obligations of registered agent.												
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
	ang manara, apar				- Triegiana or		-		<del></del>			
Filing Fee is \$61.25  Due by September 14, 2007  9. Election Campaign F Trust Fund Contribut							\$5.00 May Be Added to Fees	,   F	Make ched Iorida Depa	k payable t rtment of S		
10.		OFFICERS AND DIF	RECTORS		11,			ADDITIONS/CHA	NGES TO OFFI	CERS AND D	IRECTORS IN	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6767 SUI	SEN, JAMES NSET WAY #301 BEACH, FL 33706		☐ Delete			DO KLISA DO	t NE, RAYI 14 PINE INT CHAN	MOND Bluff LLE M	DR 0 6336	© Change 04-87	□ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1374 PIN	AYMOND E BLUFF DR HARLES, MO 63304878	34	Delete			フィ	DGE, BE 67 SUN PETE E			Channe	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6767 SUI	SEN, PATRICIA NSET WAY #301 BEACH, FL 33706		<b>⊠</b> Delete							☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition
indiantad	l on thin tone	ne information supplied with ort or supplemental report is the receiver or trustee emporachment with an address, y	true and a	courate and that r	nu cianat	turo chall b	ava tha	came local offect	se if made use	lar nath: that l	l am an office	r or director