

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47952

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** GULFSIDE GRAND DUPLEX TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15330 GULF BLVD.  
MADEIRA BEACH, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 403  
TAMPA, FL 33601 US

**New Mailing Address:**

P O BOX 8892  
MADEIRA BEACH, FL 33738 US

**FEI Number:** 59-3190599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANGELINI, DORA  
15330 GULF BLVD  
MADEIRA BEACH, FL 33708 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: VP  
Name: ANGELINI, DORA  
Address: 15330 GULF BLVD  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: P  
Name: LASKOWSKI, JEFF  
Address: 7258 N SR 39  
City-St-Zip: LIZTON, IN 46149

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: DORA ANGELINI

VP

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date