2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N92000000985

1. Entity Name
GULF BAY CENTRE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
500 NORTH INDIANA AVENUE ENGLEWOOD, FL 34223 US	508 N. INDIANA AVE. ENGLEWOOD, FL 34223 US

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01272008 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0378820

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MERCIER, LETETIA M.
508 INDIANA AVE.
ENGLEWOOD, FL 34223

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MERCIER, ARTHUR
STREET ADDRESS	508 N INDIANA AVE
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	D
NAME	CARTLAND, JULIA
STREET ADDRESS	312 LAKE TAHOE COURT
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	DST
NAME	MERCIER, LETETIA M.
STREET ADDRESS	508 N INDIANA AVE
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Letetia M Mercier Sec Treas 1/25/08 941-474-9309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #