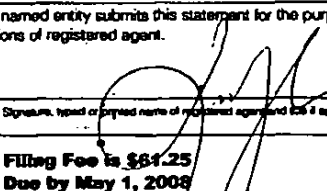
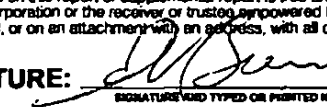


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04-22-2008 90024 008 ***6125
08 MAY 21 PM 3:15

DOCUMENT # N94000002891			
1. Entity Name GULF ISLAND BEACH & TENNIS CLUB CONDOMINIUM ASSOCIATION I, INC.			
Principal Place of Business 5401 S KIRKMAN RD STE 450 ORLANDO, FL 32819 US		Mailing Address 7625 LITTLE RD STE 315 NEW PORT RICHEY, FL 34654	
2. Principal Place of Business - No P.O. Box # 5837 Trouble Creek Rd		3. Mailing Address 5837 Trouble Creek Rd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State New Port Richey, FL		City & State New Port Richey, FL	
Zip 34652	Country USA	Zip 34652	Country USA
4. FEI Number 59-3323609		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COMMUNITY MANAGEMENT PROFESSIONAL WEST, IN 7625 LITTLE RD STE 315 NEW PORT RICHEY, FL 34654			
7. Name and Address of New Registered Agent Name Community Management Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 5837 Trouble Creek Rd City New Port Richey FL Zip Code 34652			
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 4/18/08	
Filing Fee is \$84.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BOWMAN, THOMAS A PD 6035 SEA RANCH DRIVE, #600 HUDSON, FL 34667 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Tim Martin 6035 Sea Ranch Dr. #806 Hudson, FL 34667 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WALTHER, PATRICK G TD 6035 SEA RANCH DRIVE, #503 HUDSON, FL 34667 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BREESE, EDWIN V SD 6035 SEA RANCH DRIVE, #515 HUDSON, FL 34667 ☐ 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	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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	☐ Change ☐ Addition
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: 		Date 727-816-9900	
SIGNATURE VOID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

5/21/08