

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005612

FILED
Mar 17, 2011
Secretary of State

Entity Name: YELLOWFIN BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

GATEWAY MGMT
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US

New Principal Place of Business:

1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US

Current Mailing Address:

GATEWAY MGMT
PO BOX 380758
MURDOCK, FL 33938 US

New Mailing Address:

PO BOX 380758
MURDOCK, FL 33938 US

FEI Number: 59-3294458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISHARD, KRISTINE
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US

Name and Address of New Registered Agent:

THE GATEWAY GROUP
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US

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: KRISTINE WISHARD

03/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CONRAD, JANICE
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938 US

Title: VPD
Name: MUSCARELLA, LARRY
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938 US

Title: SD
Name: BECKWORTH, SUE
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938 US

Title: TD
Name: LEVITRE, JOYCE
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938 US

Title: D
Name: BECK, CAROL
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938 US

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: JANICE CONRAD

PD

03/17/2011

Electronic Signature of Signing Officer or Director

Date