

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 25, 2009
Secretary of State**

DOCUMENT# N97000002512

Entity Name: GUMBO LIMBO VILLAS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

636 NE 13TH AVE
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

636 NE 13TH AVE
FT. LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 59-3508668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, MARK K
632 NE 13 AVE.
FT. LAUDERDALE, FL 33304 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: PD () Delete
Name: JOHNSTON, MARK
Address: 632 NE 13TH AVE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: SD () Delete
Name: POWERS, AMY A
Address: 628 NE 13TH
City-St-Zip: FT LAUDERDALE, FL 33330

Title: D () Delete
Name: ZINGG, LEONARDO
Address: 630 NE 13TH AVE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: D () Delete
Name: PENROD, MICHELE L
Address: 634 NE 13TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARK K. JOHNSTON

PD

01/25/2009

Electronic Signature of Signing Officer or Director

Date