

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003199

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** GULF PLACE COURTYARD NEIGHBORHOOD OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

7 TOWN CENTER LOOP #C16  
SANTA ROSA BEACH, FL 32549

**New Principal Place of Business:**

7 TOWN CENTER LOOP  
SUITE C16  
SANTA ROSA BEACH, FL 32549

**Current Mailing Address:**

P.O. BOX 1247  
SANTA ROSA, FL 32549

**New Mailing Address:**

P.O. BOX 1247  
SANTA ROSA BEACH, FL 32549

**FEI Number:** 59-3649240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STENBERG, CYNTHIA  
7 TOWN CENTER LOO#C16  
SANTA ROSA BEACH, FL 32459 US

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

STENBERG, CYNTHIA  
7 TOWN CENTER LOOP  
SUITE C16  
SANTA ROSA BEACH, FL 32459 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: \_\_\_\_\_

04/29/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SERRINE, ED  
Address: 12812 FALCON WOOD  
City-St-Zip: FAIRFAX, VA 22033

Title: TD ( ) Delete  
Name: SWIERCZ, ALAN  
Address: 90 SPIRES LANE #10B  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D ( ) Delete  
Name: KAYE, PETERSON  
Address: 1406 MAYWOOD AVE  
City-St-Zip: ANN ARBOR, MI 48103

Title: VPD ( ) Delete  
Name: DODGE, JULIE  
Address: 90 SPIRES LANE #8B  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD ( ) Delete  
Name: HERRINGTON, DAN  
Address: 463 RUE DE LA PLACE  
City-St-Zip: BATON ROUGE, LA 70810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SERRINE, ED  
Address: 12812 FALCON WOOD PLACE  
City-St-Zip: FAIRFAX, VA 22033

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

Title: D (X) Change ( ) Addition  
Name: PETERSON, KAYE  
Address: 1406 MAYWOOD AVE  
City-St-Zip: ANN ARBOR, MI 48103

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: ED SERINE

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date