

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # N99000004353

1. Entity Name  
**THE PENTHOUSES AT GULF STREAM CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**1501 GULF DR N  
BRADENTON BEACH, FL 34217**

Mailing Address  
**1501 GULF DR N  
BRADENTON BEACH, FL 34217**



01182008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0876265**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**VALENTE, JAMES R  
1501 GULF DR N  
BRADENTON BEACH, FL 34217**

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IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000791516  
01/23/08-80078-013 61.25

**10. OFFICERS AND DIRECTORS**

TITLE	TD
NAME	ROSS, HELEN
STREET ADDRESS	1501 GULF DRIVE N
CITY-ST-ZIP	BRADENTON BEACH, FL
TITLE	PD
NAME	BELCHER, DENNIS
STREET ADDRESS	1501 GULF DR. NO
CITY-ST-ZIP	BRADENTON BEACH, FL 34217
TITLE	SD
NAME	SUMMERS, ROY
STREET ADDRESS	1501 BULF DRIVE NORTH
CITY-ST-ZIP	BRADENTON BEACH, FL 34217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: Helen Ross

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #