

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000051437

1. Entity Name

GULF PLACE DEVELOPMENT COMPANY

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90312 012 ***150.00

Principal Place of Business

4444 W HWY 30-A
 SANTA ROSA FL 32459

Mailing Address

4444 W HWY 30-A
 SANTA ROSA FL 32459

2. Principal Place of Business

95 LAURA HAMILTON BLVD

3. Mailing Address

95 LAURA HAMILTON BLVD

Suite, Apt. #, etc.

UNIT C-5

Suite, Apt. #, etc.

UNIT C-5

City & State

SANTA ROSA BEACH FL

City & State

SANTA ROSA BEACH FL

Zip

32459

Country

Zip

32459

Country

4. FEI Number

54-3584594

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALL, STEVEN K
 36468 EMERALD COAST PARKWAY, BLDG 2,S-220A
 DESTIN FL 32541

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
 NAME ANDREWS, ANGUS G JR
 STREET ADDRESS 4444 W HWY 30-A
 CITY-ST-ZIP SANTA ROSA FL 32459

TITLE PD ☐ Delete
 NAME ABBOTT, WILLIAM W JR
 STREET ADDRESS 506 HWY 98
 CITY-ST-ZIP DESTIN FL 32541

TITLE D ☐ Delete
 NAME ABBOTT, STEPHEN
 STREET ADDRESS 506 HWY 98
 CITY-ST-ZIP DESTIN FL 32541

TITLE STD ☒ Delete
 NAME STEINER, JAMES R JR
 STREET ADDRESS 506 HWY 98
 CITY-ST-ZIP DESTIN FL 32541

TITLE D ☐ Delete
 NAME VAN DIVER, CHARLES H III
 STREET ADDRESS 506 HWY 98
 CITY-ST-ZIP DESTIN FL 32541

TITLE VD ☐ Delete
 NAME ROOKIS, RICHARD J
 STREET ADDRESS 4444 W HWY 30-A
 CITY-ST-ZIP SANTA ROSA FL 32459

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME 95 LAURA HAMILTON BLVD UNIT C-5
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
 NAME MICHELLE STEINER
 STREET ADDRESS 337 CALHOUN AVE
 CITY-ST-ZIP DESTIN FL 32541

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME 95 LAURA HAMILTON BLVD UNIT C-5
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)