

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722247

**Entity Name:** GULF SHORES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 23, 2023**  
**Secretary of State**  
**0591019857CC**

**Current Principal Place of Business:**

KEYS-CALDWELL, INC  
1162 INDIAN HILLS BLVD  
VENICE, FL 34293

**Current Mailing Address:**

KEYS-CALDWELL, INC  
1162 INDIAN HILLS BLVD  
VENICE, FL 34293 US

**FEI Number: 59-1456435**

**Certificate of Status Desired: No**

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

KEYS-CALDWELL, INC.  
1162 INDIAN HILLS BLVD.  
VENICE, FL 34293 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SECRETARY  
Name ANNEN, HERB  
Address 1162 INDIAN HILLS BLVD  
City-State-Zip: VENICE FL 34293

Title PRESIDENT  
Name HALLER, BILL  
Address 1162 INDIAN HILLS BLVD  
City-State-Zip: VENICE FL 34293

Title TREASURER  
Name ABEN, MARK  
Address 1162 INDIAN HILLS BLVD  
City-State-Zip: VENICE FL 34293

Title DIRECTOR  
Name SHAVER, DON  
Address 1162 INDIAN HILLS BLVD  
City-State-Zip: VENICE FL 34293

Title VP  
Name FRENCH, BARBARA  
Address 1162 INDIAN HILLS BVD  
City-State-Zip: VENICE FL 34293

*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: BILL HALLER**

**PRESIDENT**

**04/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date