

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724457

Entity Name: GULLWING APARTMENT CONDOMINIUM, INC.

FILED
Jan 30, 2020
Secretary of State
6847537674CC

Current Principal Place of Business:

AMERICAN CONDO MANAGEMENT
4223 DEL PRADO BLVD. S
CAPE CORAL, FL 33904

Current Mailing Address:

C/O AMERICAN CONDO MANAGEMENT
PO BOX 100399
CAPE CORAL, FL 33910 US

FEI Number: 59-1544955

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASE, SUSAN
AMERICAN CONDO MANAGEMENT
4223 DEL PRADO BLVD. S
CAPE CORAL, FL 33904 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: SUSAN KASE

01/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name COYNE, DEBORAH
Address C/O AMERICAN CONDO
MANAGEMENT
PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title VP
Name REID, ALEXANDER
Address C/O AMERICAN CONDO
MANAGEMENT
PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title TREASURER, SECRETARY
Name DEBARR, MARTINA
Address C/O AMERICAN CONDO
MANAGEMENT
PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title PRESIDENT
Name LETENDRE, DENNIS
Address C/O AMERICAN CONDO
MANAGEMENT
PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

Title DIRECTOR
Name DIMODICA, JOSEPH
Address C/O AMERICAN CONDO
MANAGEMENT
PO BOX 100399
City-State-Zip: CAPE CORAL FL 33910

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: DENNIS LETENDRE

PRESIDENT

01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date