

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724457

**FILED**  
**Apr 27, 2016**  
**Secretary of State**  
**CC5234636977**

**Entity Name:** GULLWING APARTMENT CONDOMINIUM, INC.

**Current Principal Place of Business:**

PROFESSIONAL REALTY CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
CAPE CORAL, FL 33910

**Current Mailing Address:**

C/O PROFESSIONAL REALTY CONSULTANTS  
PO BOX 100831  
CAPE CORAL, FL 33910 US

**FEI Number:** 59-1544955

**Certificate of Status Desired:** No

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

PROFESSIONAL REALTY CONSULTANTS, INC.  
3501 DEL PRADO BLVD.  
SUITE 100  
CAPE CORAL, FL 33910 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:** GEORGE TEAGUE

04/27/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name DOBLE III, CHARLES  
Address PROFESSIONAL REALTY  
CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
City-State-Zip: CAPE CORAL FL 33910

Title SECRETARY  
Name LETENDRE, DENNIS  
Address PROFESSIONAL REALTY  
CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
City-State-Zip: CAPE CORAL FL 33910

Title PRESIDENT  
Name REID, ALEXANDER  
Address PROFESSIONAL REALTY  
CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
City-State-Zip: CAPE CORAL FL 33910

Title DIRECTOR  
Name EDWARDS, MIKE  
Address C/O PROFESSIONAL REALTY  
CONSULTANTS  
PO BOX 100831  
City-State-Zip: CAPE CORAL FL 33910

Title TREASURER  
Name LEACH, LEONARD  
Address PROFESSIONAL REALTY  
CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
City-State-Zip: CAPE CORAL FL 33910

Title DIRECTOR  
Name WAITER, JEANETTE  
Address PROFESSIONAL REALTY  
CONSULTANTS  
3501 DEL PRADO BLVD. SUITE 100  
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:** ALEXANDER REID

PRESIDENT

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date