

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725492

**Entity Name:** THE GULFVIEW APARTMENTS OF MARCO ISLAND, INC.

**Current Principal Place of Business:**

58 N. COLLIER BLVD.

-  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

58 N. COLLIER BLVD.

-  
MARCO ISLAND, FL 34145

**FEI Number: 59-1738117**

**Certificate of Status Desired: No**

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

GREUSEL, JAMIE  
1104 N COLLIER BLVD  
MARCO ISLAND, FL 34145 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            PRES  
Name            HAGEN, JENA HALL  
Address        58 N. COLLIER BLVD. #804  
City-State-Zip: MARCO ISLAND FL 34145

Title            VP  
Name            GABRIEL, REGGIE  
Address        58 N. COLLIER BLVD. #1409  
City-State-Zip: MARCO ISLAND FL 34145

Title            TREASURER  
Name            LANDMAN, DEBORAH  
Address        58 NORTH COLLIER BLVD. #1602  
City-State-Zip: MARCO ISLAND FL 34145

Title            SECRETARY  
Name            JOHNSTON, JIM  
Address        58 N. COLLIER BLVD. #1206  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            AIKINS, JIM  
Address        58 N COLLIER BLVD. #1801  
City-State-Zip: MARCO ISLAND FL 34145

Title            DIRECTOR  
Name            COFER, JACK  
Address        58 N. COLLIER BLVD., #701  
City-State-Zip: MARCO ISLAND FL 34145

Title            D  
Name            THOME, GARY  
Address        58 N. COLLIER BLVD. #1112  
City-State-Zip: MARCO ISLAND FL

*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: JENA HALL HAGEN**

**P**

**03/31/2022**

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

\_\_\_\_\_  
Date