

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750904

Entity Name: VANDERBILT GULFSIDE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**10851 GULF SHORE DR.
NAPLES, FL 34108**Current Mailing Address:**10851 GULF SHORE DR.
NAPLES, FL 34108**FEI Number: 59-2202214****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
4001 TAMiami TRAIL NORTH, SUITE 410
NAPLES, FL 34103 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 WONDASCH, PAUL
Address 15 TOTTEN DRIVE
City-State-Zip: BRIDGEWATER NE 08807

Title DIRECTOR
Name REID, ALLAN
Address 820 CRAIG DRIVE
City-State-Zip: HENDERSON KY 42420

Title DIRECTOR
Name BURR, PETER
Address 5007 LONG KNIFE RUN
City-State-Zip: LOUISVILLE KY 40207

Title DIRECTOR
Name NORMAN, KAREN
Address 9230 OVERLOOK TRAIL
City-State-Zip: EDEN PRAIRIE MN 55347

Title PRESIDENT
Name TOTER, VICTORIA
Address 10951 GULF SHORE DR
1005
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name POPOWYCH, NESTER
Address 33 PARK LANE
City-State-Zip: PARK RIDGE IL 60068

Title VP
Name HOOPER, TOM
Address 10-12 DELAWARE DRIVE
City-State-Zip: SALEM NH 03079

Title TREASURER
Name MOODY, GARRY L
Address PO BOX 791
City-State-Zip: CENTER HARBOR NH 03226

Continues on page 2

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: VICTORIA TOTER**PRESIDENT****03/13/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title MANAGER
Name DAMMERT, WAYNE G
Address 333 PINEHURST CIR
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name WHITE, FREDERICK V JR.
Address 3507 NANTUCKET DR
City-State-Zip: LOVELAND OH 45140