

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43709

**Entity Name:** 100 LA PENINSULA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GULFSHORE PROPERTY MGMT.  
731 W. ELKCAM CIR. A-108  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

C/O GULFSHORE PROPERTY MGMT.  
P. O. BOX 1877  
MARCO ISLAND, FL 34146 US

**FEI Number:** 65-0270173

**Certificate of Status Desired:** No

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

GULFSHORE PROPERTY MGMT.  
731 W. ELKCAM CIR. A-108  
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 PD  
Name SCHMIDT, WILLIAM  
Address 131 LA PENINSULA BLVD  
City-State-Zip: NAPLES FL 34113

Title STD  
Name SEGAL, WARREN  
Address 109 LAPENINSULA BLVD.  
City-State-Zip: NAPLES FL 34113

Title VP  
Name JACOBSON, RONALD  
Address 241 ULSTER RD.  
City-State-Zip: ROCHESTER MI 48309

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:** SCHMIDT , WILLIAM

PD

02/11/2013

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

\_\_\_\_\_  
Date