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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
'95 MAR -1 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 703132 (1)

1. Corporation Name
EAST GATE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1308 FIR AVENUE PO BOX 425 VENICE FL 34292	1308 FIR AVENUE PO BOX 425 VENICE FL 34292

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/31/1961
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-6520332 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 1219 East Gate Dr.	2a. Mailing Address 26 P.O. Box 425
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Venice, Fl 34292	City & State 28 Venice, Fl 34284-0425
Zip / Country 24 / 25	Zip / Country 29 / 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WILEY, DOROTHEA J. 1317 POPLAR AVENUE VENICE FL 34792	81 Name: Dorothea J. Wiley 82 Street Address (P.O. Box Number is Not Acceptable): 1317 POPLAR AVE. 83 84 City: VENICE FL 85 Zip Code: 34292

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DOROTHEA J. WILEY , TREASURER — Dorothea J. Wiley — 2-24-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALLIN MARVIN 1308 FIR AVENUE VENICE FL	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P ☒ Change ☐ Addition GROSJEAN, JERRY 1219 EAST GATE DR. VENICE, FL 34292
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KOSTOCK, ELSIE 1321 FIR AVENUE VENICE FL	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	V ☒ Change ☐ Addition KIRK, E.J. 1316 POPLAR AVE. VENICE, FL 34292
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ALLIN, JUDY 1308 FIR AVE VENICE FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S ☒ Change ☐ Addition MARIA, GARY 1320 FIR AVE. VENICE, FL 34292
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WILEY, DOROTHEA 1319 POPLAR AVE. VENICE FL	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T ☐ Change ☐ Addition WILEY, DOROTHEA 1317 POPLAR AVE. VENICE, FL 34292
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOSTOCK, KENNETH 1321 FIR AVE. VENICE FL	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D ☒ Change ☐ Addition ALLIN, MARVIN 1308 FIR AVE VENICE, FL 34292
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOYER, WALTER 521 PEACH ST VENICE FL	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D ☒ Change ☐ Addition KOSTOCK, ELSIE 1321 FIR AVE. VENICE, FL 34292

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dorothea J. Wiley, Tr — Dorothea J. Wiley — 1-813-485-3572
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0081300