FILE NOW: FILING FEE IS \$61.25

1321 FIR AVENUE

VENICE FL

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 30 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #** EAST GATE PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 1316 FIR AVE P O BOX 425 3. Date Incorporated or Qualified PO BOX 425 PO BOX 425 10/31/1961 VENICE FL 34292 VENICE F 34284-0425 4. FEI Number Applied For 59-6520332 Not Applicable 2. Principal Place of Business 2s. Mailing Address \$8.75 Additional 5. Certificate of Status Desired П 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zıp Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Yes 24 Personal Property Tax due June 30. 26 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILEY, DOROTHEA J Street Address (P.O. Box Number is Not Acceptable) 1317 POPLAR AVENUE 83 VENICE FL 34292 64 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. 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 617.0503, Florida Statutes.

SIGNATURE

SIG Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS IN 12 12. 13. ADDITIONS/CHANGES TO DELETE Change Addition TITLE 1.1 TITLE DUGAN, STEPHEN T 1.2 NAME NAME 1316 FIR AVE 1308 FIRAVE STREET ADDRESS 1.3 STREET ADDRESS VENICE FL VENICE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 2.1 TITLE VELTRI AL NESBITT, THOMAS NAME 2.2 NAME 1207 MANGO AVE 205 PEACH ST STREET ADDRESS 2 3 STREET ADDRESS VENICE FL **VENICE FL** CITY-ST-ZW 2.4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE MARIA, GARY NAME 3.2 NAME 1320 FIR AVENUE 3.3 STREET ADDRESS STREET ADDRESS VENICE FL CITY-ST-ZIP 3.4. City-St-ZIP Change DELETE Addition 4.1 TITLE TITLE WILEY, DOROTHEA 4.2 NAME NAME 1319 POPLAR AVE. STREET ADDRESS 4.3 STREET ADDRESS **VENICE FL** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TITLE 5.1 TITLE ALLIN, MARVIN NAME 5.2 NAME 1308 FIR AVENUE STREET ADDRESS 5.3 STREET ADDRESS VENICE FL CITY-ST-ZIP 5.4 CITY-ST-ZIP □ DELETE Change ■ Addition TITLE 6.1 TITLE KOSTOCK, ELSIE 6.2 NAME NAME

6.3 STREET ADDRESS

Spil 22, 1988 (941) 485-3572

14. I hereby certify that the information supplied with this filing 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:

Aux. 1998 (941) 485-35-72