

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91401 005 ****61.25

0091625

DOCUMENT # 703132

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



Principal Place of Business
**1320 FIR AVE
VENICE FL 34292
US**

Mailing Address
**P O BOX 425
VENICE FL 34284-0425**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-6520332**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILEY, DOROTHEA J
1317 POPLAR AVENUE
VENICE FL 34292**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **GARY, MARIA**
STREET ADDRESS **1320 FIR AVE**
CITY-ST-ZIP **VENICE FL 34292**

TITLE **P** ☐ Change ☐ Addition
NAME **VERNA SILK**
STREET ADDRESS **1314 LAUREL AVE**
CITY-ST-ZIP **VENICE, FL. 34292**

TITLE **V** ☐ Delete
NAME **SILK, VERNA**
STREET ADDRESS **1314 LAUREL AVE**
CITY-ST-ZIP **VENICE FL 34292**

TITLE **V.** ☐ Change ☐ Addition
NAME **Julie Collins**
STREET ADDRESS **1319 FIR AVE**
CITY-ST-ZIP **VENICE, FL. 34292**

TITLE **S.** ☐ Delete
NAME **DECHERT, MITZI**
STREET ADDRESS **1311 LAUREL AVE**
CITY-ST-ZIP **VENICE FL 34292**

TITLE **S.** ☐ Change ☐ Addition
NAME **APRIL K. Polzin**
STREET ADDRESS **1319 POPLAR AVE.**
CITY-ST-ZIP **VENICE, FL. 34292**

TITLE **T** ☐ Delete
NAME **WILEY, DOROTHEA**
STREET ADDRESS **1319 POPLAR AVE.**
CITY-ST-ZIP **VENICE FL**

TITLE **T** ☐ Change ☐ Addition
NAME **GARY MARIA**
STREET ADDRESS **1320 FIR AVE**
CITY-ST-ZIP **VENICE, FL. 34292**

TITLE **D** ☐ Delete
NAME **ALLIN, JODY**
STREET ADDRESS **1308 FIR AVE**
CITY-ST-ZIP **VENICE FL 34292**

TITLE **D** ☐ Change ☐ Addition
NAME **same**
STREET ADDRESS **same**
CITY-ST-ZIP **same**

TITLE **D** ☐ Delete
NAME **KOSTOCK, ELSIE**
STREET ADDRESS **1321 FIR AVENUE**
CITY-ST-ZIP **VENICE FL**

TITLE **D** ☐ Change ☐ Addition
NAME **same**
STREET ADDRESS **same**
CITY-ST-ZIP **same**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Maria

April 29, 2003 488-0359

CR2E037 (10/02)