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03-02-1999 90127 024 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727952

1. Corporation Name

SOUTHGATE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3605 S. OCEAN BLVD.
SOUTH PALM BEACH FL 33480

Mailing Address

3605 S. OCEAN BLVD.
SOUTH PALM BEACH FL 33480



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

11/06/1973

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-1520099

Applied For
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

24 Zip 25 Country

29 Zip 30 Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHULMAYR, PATRICIA
3605 S.OCEAN BLVD.
PALM BCH FL 33480

81 Name

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

83

84 City

FL

85 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

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 P DELETE
NAME SCHULMAYER, PATRICIA
STREET ADDRESS 3605 S OCEAN BLVD
CITY-ST-ZIP S PALM BEACH, FL 00000 33480

1.1 TITLE P Change Addition
1.2 NAME Schulmayr, Patricia
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP Change Addition

TITLE T DELETE
NAME OCHS, GEORGE
STREET ADDRESS 3605 S OCEAN BLVD
CITY-ST-ZIP S PALM BEACH, FL 00000

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP Change Addition

TITLE D DELETE
NAME SALTZMAN, CY
STREET ADDRESS 3605 S OCEAN BLVD
CITY-ST-ZIP S PALM BEACH, FL 00000

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP Change Addition

TITLE S DELETE
NAME ESTRIN, ANNETTE
STREET ADDRESS 3605 S OCEAN BLVD
CITY-ST-ZIP S. PALM BEACH FL 33480

4.1 TITLE D Change Addition
4.2 NAME Estrin, Annette
4.3 STREET ADDRESS 3605 S Ocean Blvd
4.4 CITY-ST-ZIP S Palm Beach FL 33480

TITLE D DELETE
NAME HABER, HERBERT
STREET ADDRESS 3605 S OCEAN BLVD.
CITY-ST-ZIP S. PALM BEACH FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP Change Addition

TITLE V DELETE
NAME GALGANO, JOHN J
STREET ADDRESS 3605 S OCEAN BLVD
CITY-ST-ZIP S PALM BEACH FL 33480

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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, with all other like empowered.

SIGNATURE: *Patricia Schulmayr* SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-99
Date

(561) 588-0153
Daytime Phone #

CR2E037 (1/198)