

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **746753** (3)
1. Corporation Name
CENTER GATE VILLAGE CONDOMINIUM ASSOCIATION, SECTION THREE, INC.



Principal Place of Business 4215 CENTER GATE LANE SARASOTA FL 34233 US	Mailing Address 4215 CENTER GATE LANE SARASOTA FL 34233 US
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2. Principal Place of Business 21 4215 Center Gate Ln Suite, Apt. #, etc. 22 City & State 23 Sarasota, FL Zip 24 34233 Country 25 US	2a. Mailing Address 26 4215 Center Gate Ln Suite, Apt. #, etc. 27 City & State 28 Sarasota, FL Zip 29 34233 Country 30 US
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3. Date Incorporated or Qualified 04/16/1979	4. FEI Number 59-1955626	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent VOLK, ROBERT 4205 CENTER GATE LANE SARASOTA FL 34233	
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10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85 Zip Code	FL

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 *Robert Volk* President *Robert Volk* May 19, 1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	VOLK, ROBERT
STREET ADDRESS	4205 CENTER GATE LANE
CITY-ST-ZIP	SARASOTA FL
TITLE	DS <input type="checkbox"/> DELETE
NAME	PARKS, RUTHE
STREET ADDRESS	4220 CENTER POINTE LANE
CITY-ST-ZIP	SARASOTA FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	HAMILTON, KENNETH
STREET ADDRESS	4215 CENTER GATE LN
CITY-ST-ZIP	SARASOTA FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	WESTON, JOHN
STREET ADDRESS	4210 CENTER POINTE LN
CITY-ST-ZIP	SARASOTA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: *Robert Volk* President *Robert Volk* 5-19-98 (94) 377-7364

CR2E037 (10/97)