FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

9/96 941 377 5469 Date Daytime Phone is

5

CR2E037

1996

Principal Place of Business

CITY - ST - ZIP

DOCUMENT # 756821

(5)

Mailing Address

CENTER GATE VILLAGE CONDOMINIUM ASSOCIATION SECT ION SIX, INC.

4339 BOWLING GREEN CIR 4339 BOWLING GREEN CIR SARASOTA FL 34233-1644 SARASOTA FL 34233-1644 Date Incorporated or Qualified 03/17/1981 4. FEI Number 59-2126400 2. Principal Place of Business 2a. Mailing Address Applied For 4312 Dresden 4312 Dresden Lane Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Saraso 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 9. Name and Address of Current Registered Agent 30 Yes X No Florida Statutes 10. Name and Address of New Registered Agent 81 Name DIROSARIO, ANTHONY 82 Street Address (P.O. Box Number is Not Acceptable) 4339 BOWLING GREEN CIR SARASOTA FL 34233 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change M Addition MARCUS, BERNARD S William B. Benzer 4356 Dresdenhame Sansofa, FL 34233 PD NAME 1.2 NAME 4324 DRESDEN LANE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2 1 TITLE DIROSARIO, ANTHONY William A. Hyers 4212 Dresden Lane NAME 2 2 NAME 4339 BOWLING GREEEN CIR. STREET ADORESS 23 STREET ADDRESS SARASOTA, FL 00000 CITY - ST - ZIP 2 4 CITY - ST - ZIP Samsota, FL 34233 TITLE DELETE 3.1 TITLE Addition PORTER, THELMA NAME 32 NAME 4328 DRESDEN LN. STREET ADDRESS 3.3 STREET ADDRESS SARASOTA, FL 00000 CITY - ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4 1 TITLE Addition D SACHS, THELMA NAME 4 2 NAME 4332 DRESDEN LN. STREET ADDRESS 4.3 STREET ADDRESS SARASOTA, FL 00000 CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 51 TITLE Addition Change POLING, JOSEPHINE NAME 5.2 NAME 4347 BOWLING GREEN CIR STREET ADDRESS **5 3 STREET ADDRESS** SARASOTA FL CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING