

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90218 048 ****61.25

DOCUMENT # N04000002912
 1. Entity Name
SOUTH GATE VILLAGE GREEN CONDOMINIUM SECTION TEN ASSOCIATION, INC.



Principal Place of Business Mailing Address
3248 VILLAGE GREEN DR SARASOTA FL 34239 **3248 VILLAGE GREEN DR SARASOTA FL 34239**

50019799



1st MOORE CR2E037 (10/04)

2. Principal Place of Business 3. Mailing Address
3248 VILLAGE GREEN DR **3248 VILLAGE GREEN DR**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
SARASOTA, FL **SARASOTA FL**
 Zip Country Zip Country
34239 USA **34239 USA**

4. FEI Number Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
EDWARDS, KEVIN L ESO
C/O BECKER & POLIAKOFF PA
630 S ORANGE AVE
SARASOTA FL 34236

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE	PRESIDENT <input checked="" type="checkbox"/> Delete
NAME	PATRICIA E. FRYE
STREET ADDRESS	3254 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	VICE-PRESIDENT <input checked="" type="checkbox"/> Delete
NAME	DOUGLAS ESTEN
STREET ADDRESS	3230 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	TREASURER <input type="checkbox"/> Delete
NAME	PRISCILLA RUDDIMAN
STREET ADDRESS	3248 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	SECRETARY <input checked="" type="checkbox"/> Delete
NAME	BETTY BENTSEN
STREET ADDRESS	3212 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	DIRECTOR <input type="checkbox"/> Delete
NAME	SHIRLEY WIPKE
STREET ADDRESS	3206 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	DIRECTOR <input checked="" type="checkbox"/> Delete
NAME	DARRELL WOODS
STREET ADDRESS	3260 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT L. FRYE
STREET ADDRESS	3254 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	VICE-PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRY BENTSEN
STREET ADDRESS	3212 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATRICIA DERMONT
STREET ADDRESS	3309 WESTERLY LANE
CITY-ST-ZIP	SARASOTA, FL 34239-6714
TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANCES ESTEN
STREET ADDRESS	3230 VILLAGE GREEN DR
CITY-ST-ZIP	SARASOTA, FL 34239-6714

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: Robert L Frye **ROBERT L. FRYE** 2-21-05 941-922-7386
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #