FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1	996	DIVISION OF CORE	PORATIONS		
DOCUM 1. Corporation I	Name	0003150 (9)			
	gate village green co	INDOMINIUM SECTION S	SIX	A HAGNING BIO HANN BYEN BEST CANAL BE	IL BANKA BUNUK KINGK KINGK BINK BONK HORI
, INC.					
Principal Place of	of Business	Mailing Address		(10011101 414 (2011 51611 4011) 30111 40111	1 2011 44144 Hill 1144 1144 2141 2411 1421
3259 PINECREST ST. 3259 PINECREST ST.					
SARASOTA FL	34239	SARASOTA FL 34239			
				3. Date Incorporated or Qualified 06/20/1994	3a. Date of Last Report 05/01/1995
2. Principal Plac		2a. Mailing Address	/ 1	4. FEI Number 65-0524161	Applied For Not Applicable
21 3278 BROCKTON LN 26 3278 BROCK Suite, Apt. #, etc. Suite, Apt. #, etc.			STON LM		\$8.75 Additional
22	, 80.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	FL	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
	Country Country	28 5ARASOTA	Country	This corporation has liability for intal	
24 34 2		29 34239 30	4.S.A	Florida Statutes	Yes 🔀 No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Reg	istered Agent
08/000	ALANOV M			KING, NORBERT	
GRIGGS, NANCY M 3259 PINECREST ST.				ddress (P.O. Box Number is Not Acceptable)	W
SARASOTA FL 34239			63	RASOTA	
				ZASCIA	85 Zip Code
				easting a horizo this statement for the nume	FL 34234
			ie above-named cor y the corporation's b	poration submits this statement for the purpo- oard of directors. I hereby accept the appoin	tment as registered agent. I am
familiar wit	h, and accept the obligations of, Secti	on 617.0503, Florida Statutes		4-2	-96
SIGNATURE _	Signature, type for printed name or registered age it		gistered Agent signature rec	jured when reinstating)	DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	PD Griggs, Nancy M.	DELETE	1.1 TITLE 12 NAME	PD AND PEDE	
NAME STREET ADDRESS	3259 PINECREST ST.		1.3 STREET ADDRESS	3278 BROCKTON LAN	se-
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	EARNSOTA, FL	
TITLE	VPD	DELETE	2 1 TITLE	UPD	Change Addition
NAME	KING, NORBERT 3278 BROCKTON LANE		2.2 NAME 2.3 STREET ADDRESS	SOILL, MARCIA	L
STREET ADDRESS	SARASOTA FL		2 4 CITY - ST - ZIP	SARASOTA PL	- -
CITY-ST-ZIP TITLE	\$	DELETE	3.1 TITLE	\$	Change Addition
NAME	BARKER, GERALD		3 2 NAME		
STREET ADDRESS	3273 PINECREST ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL TD	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE	SULLIVAN, GERALD	Doccere	4. 2 NAME		
NAME STREET ADDRESS	3232 BROCKTON LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY - ST - ZIP		D 0h
TITLE	D	DELETE	51 TITLE		☐ Change ☐ Addition
NAME	KLIMER, A.		5.2 NAME		
STREET ADDRESS	3212 BROCKON LANE		5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

14. If 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.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE WIN TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941 922-3672

CR2E037 (12/95)