FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000006045 (6)

FILED May 14 1998 8:00am Secretary of State

STUNEGATE OWNERS ASSUCIATION, INC.									
Principal Place	e of Business	Mailing Address				98111 89111 881	16 61111 66111 1	31881 8111 1881	
2700-D N.W. 43RD STREET 2700-D N.W. 43RD STREET GAINESVILLE FL 32806 GAINESVILLE FL 32806			Т		3. Date Incorporated or Qualified 11/26/1996				
					4. FEI Number 59-3423665		-	pplied For ot Applicable	-
2. Principal P	lace of Business	2a. Mailing Address					 _	Additional	1
21 2830 NW 41 St. 28 P.O. BOX 14"				0-30	Certificate of Status Desired		Fee R	equired	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 Suite F					6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	•	Ì
City & State City & State			PL		7. Is this nonprofit corporation a l	nomeowners	associatio	χη?	1
Zip Country Zip Zip				untry	Yes No 8. This corporation owes or has paid the current year Intangible				1
24 3260	6 25 Alachua	29 32614-7050		Machua	Personal Property Tax due Jun	e 30. 🏻 🗀	Yes [☐ No	
	9. Name and Address of Current	Registered Agent		51 1	10. Name and Address of New R	egistered A	gent		┨
				81 Name S	mith, Beverly K.				
SHAW, JAMES W				82 Street Ad	dress (P.O. Box Number is Not Accepte	able)			1
2700-D N.W. 43RD STREET				28	30 NW 41 Street				┨
GAINESVILLE FL 32806					ite F				
				84 City	. 1	FL	85 Zip	Code LOL	1
11. Pursuant	to the provisions of Sections 617 0502	and 617.1508. Florida Statu	tes, the a	bove-named co	reporation submits this statement for the	purpose of	changing	ts registered	┪
office or r	egistered agent, or both, in the State of miliar with, and accept the obligat	f Florida, Such change was	authorize	d by the corpor	rporation submits this statement for the ation's board of directors. I hereby according	ept the appo	ointment as	registered	
	in familiar with, and accept the congat	X section 617.0505, F	ioriua sta	iutes.		3-25-	-98		
SIGNATURE .	Signature, typed or printed nurse of registered agent	and title if applicable. (NO	TE: Registere	d Agent signature rec	ulred when reinstating)	DATE			اد
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND]8
TITLE	PD	☐ DÉLETE	1.1 T	ITLE			Change	☐ Addition	CR2E037 (10/97)
NAME	HODOR, HOWARD		1.2 N	AME					8
STREET ADDRESS	2700-D N.W. 43RD STREET		1.3 \$	TREET ADDRESS					区
CITY-ST-ZIP	GAINESVILLE FL 32606	Devete	_	ITY-ST-ZIP			Channe	- Ladition	兴
TITLE	VSTD	☐ DELETE	2.1 T	1			Change	Addition	۲
NAME	SHAW, JAMES W		2.2 N						
STREET ADDRESS	2700-D N.W. 43RD STREET Gainesville FL 32608			TREET ADDRESS					
CITY-ST-ZIP TITLE	D D	DELETE	2. 4 I	CITY-ST-ZIP		·	Change	Addition	1
NAME	HOLDEN, CHARLES I JR.		3.2 N						
STREET ADDRESS	2700-C N.W. 43RD STREET			TREET ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL 32606			City-St-ZIP					
TITLE		DELETE	4.1 T				Change	Addition	1
NAME			4.21	NAME				\	;
STREET ADDRESS			4.3 S	TREET ADDRESS				,	ļ
CITY-ST-ZIP			4.4 0	ITY-ST-ZIP					N
TITLE		☐ D e lete	5.1 T	ITLE			Change	Addition	1
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 S	TREET ADDRESS					1
CITY-ST-ZIP				ITY-ST-ZIP			Па:	— 4400	-
TITLE		☐ DELETE	6.1 T	1			Change	☐ Addition	1
NAME			6.2 N	1					
STREET ADDRESS				TREET ADDRESS					
CITY-ST-ZIP	partitive that the information as maling with	this filing does not excelled		amption stated	in Section 119 07/3\/i) Florida Statutes	I further cor	rtify that the	e Information	-

Indicated on this annual report or supplied with this limit does not quality on the exemption stated in section 119.07(3)), Florida Statutes. Indicates the finding of the corporation o

4/30/08