2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # 727952

1. Entity Name
SOUTHGATE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3605 S. OCEAN BLVD. SOUTH PALM BEACH, FL 33480	3605 S. OCEAN BLVD. SOUTH PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

01182006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1520099

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHULMAYR, PATRICIA
3605 S.OCEAN BLVD.
PALM BCH, FL 33480

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCHULMAYR, PATRICIA
STREET ADDRESS	3605 S OCEAN BLVD
CITY-ST-ZIP	SOUTH PALM BEACH, FL 33480
TITLE	V
NAME	OCHS, GEORGE
STREET ADDRESS	3605 S OCEAN BLVD
CITY-ST-ZIP	SOUTH PALM BEACH, FL 33480
TITLE	D
NAME	EDELSTEIN, HULDA
STREET ADDRESS	3605 S. OCEAN BLVD
CITY-ST-ZIP	SOUTH PALM BEACH, FL 33480
TITLE	D
NAME	HABER, HERBERT
STREET ADDRESS	3605 S OCEAN BLVD.
CITY-ST-ZIP	S. PALM BEACH, FL
TITLE	S
NAME	GALGANO, JOHN J
STREET ADDRESS	3605 S OCEAN BLVD
CITY-ST-ZIP	SOUTH PALM BEACH, FL 33480
TITLE	T
NAME	WRONSKY, EDWARD Z
STREET ADDRESS	3605 S OCEAN BLVD
CITY-ST-ZIP	SOUTH PALM BEACH, FL 33480

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02/02/06-80062-012 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Patricia Schulmayr Pres. 1.17.06 561-588-0153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #