

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08520

**Entity Name:** SOUTH GATE VILLAGE GREEN CONDOMINIUM SECTION  
EIGHT ASSOCIATION, INC.**Current Principal Place of Business:**3211 BRUNSWICK LANE  
SARASOTA, FL 34239**Current Mailing Address:**P. O. BOX 5401  
SARASOTA, FL 34277 US**FEI Number: 59-2452979****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CLARK, BRIAN  
3211 BRUNSWICK  
SARASOTA, FL 34239 US*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.***SIGNATURE: BRIAN CLARK****04/08/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRESIDENT, DIRECTOR  
**Name** CLARK , BRIAN  
**Address** 3211 BRUNSWICK LANE  
**City-State-Zip:** SARASOTA FL 34239**Title** VP, DIRECTOR  
**Name** FUNK, KEITH  
**Address** 3302 VILAGE GREEN DRIVE  
802  
**City-State-Zip:** SARASOTA FL 34239**Title** SECRETARY, DIRECTOR  
**Name** SHAFFER, PATRICIA  
**Address** 3272 SOUTHFIELD LANE  
**City-State-Zip:** SARASOTA FL 34239**Title** TREASURER, DIRECTOR  
**Name** LINDY, LINUS  
**Address** 3312 VILLAGE GREEN DRIVE  
**City-State-Zip:** SARASOTA FL 34239**Title** DIRECTOR  
**Name** LINDERMAN, PETER  
**Address** 3318 VILLAGE GREEN DRIVE  
**City-State-Zip:** SARASOTA FL 34239

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: LINUS LINDY****DIRECTOR/TREASURER****04/08/2019**

Electronic Signature of Signing Officer/Director Detail

Date