

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90037 023 ***150.00

DOCUMENT # 310688

1. Entity Name
NORTHGATE DEVELOPMENT COMPANY INC



Principal Place of Business
**135 PERRY AVE. S.E.
FORT WALTON BEACH, FL 32548**

Mailing Address
**PO BOX 2977
FORT WALTON BEACH, FL 32549**

50015928



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102005

Chg-P

CR2E034 (10/03)

4. FEI Number

59-1156672

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCGEE JOHN C.
259 YACHT CLUB DR
FORT WALTON BEACH, FL 32548**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T ☐ Delete
NAME **MCGEE, JOHN C.**
STREET ADDRESS **259 YACHT CLUB DRIVE**
CITY-ST-ZIP **FORT WALTON BEACH, FL 32548**

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

P ☐ Delete
NAME **WALKER, WINSTON**
STREET ADDRESS **255 YACHT CLUB DR**
CITY-ST-ZIP **FORT WALTON BEACH, FL 32548**

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

S ☐ Delete
NAME **ROBERTS, RANDALL P**
STREET ADDRESS **188 GRANDVIEW AVE**
CITY-ST-ZIP **VALPARAISO, FL 32580**

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

EVP ☐ Delete
NAME **MINGER, JOHN W JR**
STREET ADDRESS **344 RUCKEL DRIVE**
CITY-ST-ZIP **NICEVILLE, FL 32578**

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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: *John C. McGee*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/05
Date

Daytime Phone #