2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #724624

FILED Apr 21, 2008 8:00 am Secretary of State 04-21-2008 90063 033 ****61.25

1. Entity Name TREGATE MANOR CONDOMINIUM ASSOCIATION, INC.							0	4-21-2008 9	90063 03	3 ****61	.25
2240 STICKNEY POINT RD ARGU SARASOTA, FL 34231 247			ailing Address RGUS PROP. MGMT 477 STICKNEY POINT RD ARASOTA, FL 34231 US								
Principal Place of Business - No P.O. Box # 3. Maili				Mailing Address							
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			04152008	Chg-NP	CR2E03	7 (12/06)	
City & State			City	City & State			4. FEI Number 59-1459894			⊢ ⊢ ⊢	phied For at Applicable
Zip	Country		Zip	Zip Cour		,	5. Certificate of	Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
			-		١	lame					
ARGUS PROPERTY MGMT 2477 STICKNEY POINT RD SUITE 118 A					s	Street Address (P.O. Box Number is Not Acceptable)					
		231									
SARASOTA, FL 34231						City			FL	Zip Cod	е
	ions of regis			ose of changing its	registered o	office or registe	ered agent, or both,	in the State of Flo		amiliar with,	and accept
GIGHT	Signature, typed	d or printed name of registered agent a	ind title if app	scable. (NOTE	: Registered Ag	ent signature requir	ed when reinstating)		DATE		
SIGNATIONE	Filing Fe	e is \$61.25 May 1, 2008	ind title if app	9. Election Can Trust Fund C	npaign Fina		\$5.00 May Be Added to Fees	I	take check	payable to	
10.	Filing Fe	e is \$61.25		9. Election Car	npaign Fina	ncing	\$5.00 May Be	Flor	lake check rida Depart	tment of S	tate
10.	Filing Fe	ee is \$61.25 May 1, 2008		9. Election Car Trust Fund C	npaign Final Contribution.	ncing	\$5.00 May Be Added to Fees	Flor	lake check rida Depart	RECTORS IN	tate
	Filing Fe	oe is \$61.25 May 1, 2008 OFFICERS AND DIR		9. Election Car	npaign Final Contribution.	ncing	\$5.00 May Be Added to Fees	Flor	lake check rida Depart	tment of S	tate
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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 attactored with an exercise with all other like empowered.

SIGNATURE:

941-927-6464