

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90454 032 ****61.25

DOCUMENT # 733895

1. Entity Name
**GATOR CREEK ESTATES IMPROVEMENT
ASSOCIATION, INC**



Principal Place of Business
**6425 S. GATOR CREEK BLVD.
SARASOTA, FL 34241**

Mailing Address
**6425 S. GATOR CREEK BLVD.
SARASOTA, FL 34241**

50015393



01232006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1920513

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**O'NEILL, ROBERT
7151 RUSTIC ACRES
SARASOTA, FL 34241**

**DO NOT WRITE
IN THIS SPACE**

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

Robert M. O'Neill

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

(NOTE: Registered Agent signature required when reinstating)

April 19, 2006

DATE

**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	PD
NAME	KECKER, LARRY
STREET ADDRESS	6801 SHETLAND WAY
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	D
NAME	BOBIRN, ED
STREET ADDRESS	7200 CHAMELEON WAY
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	D VD
NAME	ENGLISH, FRANK
STREET ADDRESS	7450 GATOR CAESER BLVD
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	TD
NAME	O'NEILL, ROBERT
STREET ADDRESS	7151 RUSTIC ACRES
CITY-ST-ZIP	SARASOTA, FL
TITLE	VD PD
NAME	KREISEDER, JOHN
STREET ADDRESS	6601 GATOR CREEK BLVD
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	SD
NAME	DEAN, KELLY
STREET ADDRESS	6701 GATOR CREEK BLVD
CITY-ST-ZIP	SARASOTA, FL 34241

**DO NOT WRITE
IN THIS SPACE**

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:

Robert M. O'Neill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 2006

Date

941-657-8802

Daytime Phone #