

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2005 8:00 am
Secretary of State

08-17-2005 90003 013 ****61.25

DOCUMENT # 740015

1. Entity Name
GULF GATE PINES OWNERS ASSOCIATION, INC.



Principal Place of Business
**2238 PINE VIEW CIRCLE
SARASOTA, FL 34231 US**

Mailing Address
**2238 PINE VIEW CIRCLE
SARASOTA, FL 34231 US**

50062088



2. Principal Place of Business

2247 PINE VIEW CIRCLE
Suite, Apt. #, etc.

3. Mailing Address

2247 PINE VIEW CIRCLE
Suite, Apt. #, etc.

08142005 Chg-NP CR2E037 (10/03)

City & State
SARASOTA, FL

City & State
SARASOTA, FL

4. FEI Number
59-1982416

Applied For
Not Applicable

Zip
34231

Country
USA

Zip
34231

Country
USA

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

6. Name and Address of Current Registered Agent

**CLEMONS, JACKIE MRS.
2238 PINE VIEW CIRCLE
SARASOTA, FL 34231**

7. Name and Address of New Registered Agent

Name **STANLEY A. BRIGGS**
Street Address (P.O. Box Number is Not Acceptable)
2247 PINE VIEW CIRCLE
City **SARASOTA** FL Zip Code **34231**

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

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ ☒ Delete
NAME **CLEMONS, J**
STREET ADDRESS **2238 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☒ Delete
NAME **WRIGHT, M**
STREET ADDRESS **2234 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☒ Delete
NAME **PARKER, J**
STREET ADDRESS **2284 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☐ Delete
NAME **BRIGGS, S**
STREET ADDRESS **2247 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☒ Delete
NAME **FANELLE, B**
STREET ADDRESS **2275 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ ☒ Change ☒ Addition
NAME **CONN, GEORGE A.**
STREET ADDRESS **2242 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☒ Change ☒ Addition
NAME **DOWNER, DAVID**
STREET ADDRESS **2288 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☒ Change ☒ Addition
NAME **KNAUTZ, KAREN**
STREET ADDRESS **2241 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

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

TITLE ☐ ☒ Change ☒ Addition
NAME **HILLSTROM, GREG**
STREET ADDRESS **2243 PINE VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE ☐ ☐ 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 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:

Stanley A. Briggs **STANLEY A. BRIGGS**

8/14/2005 **941-924-6697**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #