2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741860

FILED Jan 09, 2009 Secretary of State

Entity Name: CENTER GATE VILLAGE CONDOMINIUM ASSOCIATION, INC.

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---------------------------------------------|---------------------------------------------------------|----------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------|--|
| | NOR PLACE A, FL 34232 | US | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | |
| | NOR PLACE A, FL 34232 | US | | | |
| FEI Number: | 59-1890666 | FEI Number Applied For () | FEI Number Not Appl | icable () Certificate of Status Desired () | |
| Name and | Address of C | urrent Registered Agent: | Name and | Address of New Registered Agent: | |
| | P.A. NOR PLACE A, FL 34232 | US | | | |
| The above in the State | | ubmits this statement for the pu | rpose of changing i | ts registered office or registered agent, or both, | |
| SIGNATUF | RE: | | | | |
| | Electroni | ic Signature of Registered Agen | t | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITION | S/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () JAFFE, JOEZE 3901 CENTER (SARASOTA, FL | SATE CIR | Title: Name: Address: City-St-Zip: | P (X) Change () Addition JAFFE, JOELE B 3901 CENTER GATE CIR SARASOTA, FL 34233 | |
| Title: Name: Address: City-St-Zip: | VP () WESTBROOK, I 3916 CENTER C SARASOTA, FL | SATE CIR | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | S () PARROTT, EVE 3906 CENTER C SARASOTA, FL | SATE CIRCLE | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | BM () RICHART, ANN 3907 CENTER C SARASOTA, FL | | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | BM () REPPER, ELSIE 3905 CENTER O SARASOTA, FL | SATE CIR. | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KENNET D. PROKOP RA 01/09/2009