FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

745337 DOCUMENT #

(6)

CENTER GATE VILLAGE CONDOMINIUM ASSOCIATION, SEC TION TWO, INC.

Principal Place of Business

Mailing Address

5717 CENTER POINT LANE



SARASOTA FI		SARASOTA FL 34233							
U\$		U\$			3. Date	Incorporated or Qualified 12/21/1978	3a. Date 02	of Last F /09/19	
	ace of Business	2a. Mailing Address			4. FEI N	lumber 59-1964016			pplied For
		26 4103 Center Gate Blvd			d.	9-1904010			ot Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certi	ficate of Status Desired			Additional equired
City & State 23 Saras	sota F1.	City & State 28 Sarasota F1.				ion Campaign Financing : Fund Contribution	S5.00 May Be Added to Fees		
Zip 24 3423	Country 25 U · S · A ·	Zip 29 34233	Cou	ntry S.A.		corporation has liability for in	ntangible tax u		199,032,
	9. Name and Address of Current		100 0 1			e and Address of New Ro			
				81 Name	b=11 D		. -		
KOBEL.	JOHN H				rshall Donald				
	NTER POINTE LANE		82 Street Address (P.O. Box Number is Not Acceptable) 4103 Center Gate Blvd.						
_	TA, FL MH 34233			83					
J				94 0%			······································	05 7:0	Codo
				Sara	sota		FL	85 3 ^{Zi} 2	233
11. Pursuant t	to the provisions of Sections 617,0502 a	nd 617.1508, Florida Statute	s, the abo	ve-named cor	poration submit	s this statement for the purp	pose of chang	jing its re	gistered office
or register familiar wit	to the provisions of Sections 617.0502 a ed agent, or both, in the State of Florida th, and accept the obligations of, Sectio	. Such change was authorize n 617.0503, Florida Statutes.	d by the c	orporation's b	oard of director	rs. I hereby accept the appo	ointment as re	gistered a	agent. I am
SIGNATURE	DONALD A. MARSHY Stgnature, typed or printed name of registered agent ar	. w .			<i>」</i> quired when reinstatin		3/, \ 90	5	
12.	OFFICERS AND		13.			ITIONS/CHANGES 10 OFFI	ICERS AND D	RECTO	RS IN 12
TITLE	PD	DELETE	1.1 TI	LE L	D		K	Change	Addition
NAME	Kobel, John H		1.2 N/	ME					
STREET ADDRESS	5717 CENTER POINTE LANE		1.3 \$1	REET ADDRESS					
CITY-ST-ZIP	SARASOTA FL		1.4 CI	TY - ST - ZIP					
TITLE	TD	IK] DEL€TE	2.1 TI		7D	···		Change	X Addition
NAME	HULME, LLOYD S		2.2 N		1ARRERO				
STREET ADDRESS	4129 CENTER POINTE DR		238	HELI ADDRESS		nter Pointe	Drive		
CITY-ST-ZIP	SARASOTA FL		2.40	ITY-ST-ZIP	Sarasot	a F1. 34233		····	
TITLE	D	₹]DELETE	3.1 Ti		D			Change	Addition
NAME	PHYLLIS, PETRIDES		32 N	IIII.	NGRAM,				
STREET ADDRESS	4101 CENTER GATE BLVD		338	MEET HOOFIEGO		nter Gate Bl	.vd.		
CITY - ST - ZIP	SARASOTA FL		3.4. 0	ITY-ST-ZIP	Sarasot	a F1. 34233			
TITLE	SD	DELETE	4.1 Ti	TLE				Change	Addition
NAME	CHANNELL, A		4. 2 1	AME					
STREET ADDRESS	5773 CENTER POINTE LANE		4.3 S	REET ADDRESS					
CITY-ST-ZIP	SARASOTA FL			TY-ST-ZIP					
TITLE	VD	DELETE	5.1 T	TLE	PTD		X	Change	Addition
NAME	MARSHALL, DONALD		5.2 N						
STREET ADDRESS	4103 CENTER GATE BLVD			FREET ADDRESS					
CITY-ST-ZIP	SARASOTA FL	Mar. ere		TY-ST-ZIP				01	
TITLE	D NATEDIAN ALEDED	DELETE	61 T				L	Change	Addition
NAME	HALEBLIAN, ALFRED		62 N						
STREET ADDRESS	5781 CENTER POINTE LANE			TREET ADDRESS					
CITY-ST-ZIP	SARASOTA FL			TY-ST-ZIP			67/0V/L) 5 / :		
14. I do hereb	by certify that the information supplied w	ith this filing is voluntarily furni	ished and	does not qual	iny for the exem	ption stated in Section 119.	.07(3)(k), Floric	ia Statute	es. I turther

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or or an attachment with an address.

DOSEGNATURE AND SPECIAL PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-371-5567