

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745337

FILED
Jan 19, 2009
Secretary of State

Entity Name: CENTER GATE VILLAGE CONDOMINIUM ASSOCIATION, SECTION TWO, INC.

Current Principal Place of Business:

5729 CENTER POINTE LANE
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

5729 CENTER POINTE LANE
SARASOTA, FL 34233 US

New Mailing Address:

FEI Number: 59-1964016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARBER, CHARLES
5709 CENTER POINTE LANE
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: KOBEL, DENISE
Address: 5717 CNTR POINTE LN
City-St-Zip: SARASOTA, FL 34233 US

Title: S () Delete
Name: PAUL, MILDRED
Address: 5741 CENTER POINTE LANE
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: MOREA, FRANK
Address: 4129 CENTER POINTE DRIVE
City-St-Zip: SARASOTA, FL 34233

Title: T () Delete
Name: BARGER, BOBBIE R
Address: 5709 CTR PT LN
City-St-Zip: SARASOTA, FL 34233

Title: V () Delete
Name: DAGEN, HARVEY
Address: 5733 CENTER POINTE LANE
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOBEL, DENISE
Address: 5717 CNTR POINTE LN
City-St-Zip: SARASOTA, FL 34233 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MARSHALL, DONALD
Address: 4103 CENTER GATE BLVD
City-St-Zip: SARASOTA, FL 34233

Title: V (X) Change () Addition
Name: GARBER, BOBBIE R
Address: 5709 CTR PT LN
City-St-Zip: SARASOTA, FL 34233

Title: T (X) Change () Addition
Name: HENRIKSEN, GLORIA
Address: 4107 CENTER GATE BLVD
City-St-Zip: SARASOTA, FL 34233

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: DENISE KOBEL

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date