

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90011 035 ****61.25

DOCUMENT # 752773

1. Entity Name

COLONIAL GABLES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

PMB 137
4025 CATTLEMAN RD.
SARASOTA FL 34233
US

Mailing Address

PMB 137
4025 CATTLEMAN RD.
SARASOTA FL 34233
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BABIN, ELISABETH
3620 SPAINWOOD DR
SARASOTA FL 34232

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 P
NAME BABIN, ELISABETH ☐ Delete
STREET ADDRESS 3620 SPAINWOOD DR
CITY-ST-ZIP SARASOTA FL 34232

TITLE BD
NAME FAIRCHILD, DOUGLAS ☒ Delete
STREET ADDRESS 5411 STARWOOD PL
CITY-ST-ZIP SARASOTA FL 34232

TITLE BD
NAME WALLACE, JAMES ☐ Delete
STREET ADDRESS 5528 BRIARCLIFF DRIVE
CITY-ST-ZIP SARASOTA FL 34232

TITLE TS
NAME DANIELS, CAROL ☐ Delete
STREET ADDRESS 5521 DUNCANWOOD DRIVE
CITY-ST-ZIP SARASOTA FL

TITLE SBO
NAME BROWN, SUSAN M ☐ Delete
STREET ADDRESS 5315 DUNCANWOOD DR
CITY-ST-ZIP SARASOTA FL

TITLE BD
NAME DANIELS, WAYNE G ☐ Delete
STREET ADDRESS 5321 DUNCANWOOD DR
CITY-ST-ZIP SARASOTA FL 34232

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DOLH, VICTOR ☐ Change ☒ Addition
NAME BO
STREET ADDRESS 3609 Spainwood Dr
CITY-ST-ZIP Sarasota, FL 34232

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

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

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

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

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

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: *Carol Daniels Carol Daniels* *2-12-04* *941-376-3275*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #