

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753088

FILED  
Jan 22, 2009  
Secretary of State

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

**Current Principal Place of Business:**

4190 BOWLING GREEN CIR  
SARASOTA, FL 34233 US

**New Principal Place of Business:**

**Current Mailing Address:**

4190 BOWLING GREEN CIR  
SARASOTA, FL 34233 US

**New Mailing Address:**

**FEI Number:** 59-2016589

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCOTT, DANIEL E. ATTY.  
2170 MAIN ST.  
SARASOTA, FL 34237 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: SD ( ) Delete  
Name: HAMILTON, DR EDWARD  
Address: 4196 BOWLING GR CIRCLE  
City-St-Zip: SARASOTA, FL 34233

Title: PD ( ) Delete  
Name: MAHAFFEY, RICHARD  
Address: 4316 BOWLING GREEN CIR  
City-St-Zip: SARASOTA, FL 34233

Title: TD ( ) Delete  
Name: SALE, LYNN L  
Address: 4372 BOWLING GREEN CIR  
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: KREMER, JOHN  
Address: 4144 BOWLING GR CIRCLE  
City-St-Zip: SARASOTA, FL 34233 US

Title: PD (X) Change ( ) Addition  
Name: MAHAFFEY, RICHARD  
Address: 4316 BOWLING GREEN CIR  
City-St-Zip: SARASOTA, FL 34233 US

Title: TD (X) Change ( ) Addition  
Name: SALE, LYNN L  
Address: 4372 BOWLING GREEN CIR  
City-St-Zip: SARASOTA, FL 34233 US

Title: VPD ( ) Change (X) Addition  
Name: SCHENE, SANDY  
Address: 4128 BOWLING GREEN CIR  
City-St-Zip: SARASOTA, FL 34233 US

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: LYNN L. SALE

TD

01/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date