

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90434 038 \*\*\*\*61.25

<b>DOCUMENT # 754875</b> 1. Entity Name NORTHGATE CENTER ASSOCIATION, INC.			
Principal Place of Business 722 APEX ROAD, UNIT E SARASOTA, FL 34240		Mailing Address 722 APEX ROAD, UNIT E SARASOTA, FL 34240	
2. Principal Place of Business - No P.O. Box # 1877 Northgate Blvd #4		3. Mailing Address PO Box 50665	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State SARASOTA FL		City & State Sarasota FL	
Zip 34234		Zip 34232-0305	
Country USA		Country USA	
4. FEI Number 59-2056211		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  KLEIBER, WILLIAM 722 APEX ROAD, UNIT E SARASOTA, FL 34240		7. Name and Address of New Registered Agent Name <u>WELLS, KEVIN T, ESQ</u> Street Address (P.O. Box Number is Not Acceptable) <u>22 S. Links Ave #301</u> City <u>SARASOTA, FL</u> <u>FL</u> Zip Code <u>34236</u>	
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 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D NAME KLEIBER, BILL STREET ADDRESS 722 APEX RD UNIT E CITY-ST-ZIP SARASOTA, FL 34240	<input checked="" type="checkbox"/> Delete	TITLE P NAME Brown, Michael STREET ADDRESS 4376 Independence Ct CITY-ST-ZIP Sarasota, FL 34234	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VD NAME JODY GILLMAN STREET ADDRESS 1743 INDEPENDENCE BLVD CITY-ST-ZIP SARASOTA, FL 34234	<input checked="" type="checkbox"/> Delete	TITLE T S NAME Vorbeck, CARY STREET ADDRESS 4470 Northgate Ct. CITY-ST-ZIP Sarasota, FL 34234	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE PTD NAME COMPARETTO, MARIO STREET ADDRESS 1920 NORTHGATE BOULEVARD SUITE A-7 CITY-ST-ZIP SARASOTA, FL 34234	<input checked="" type="checkbox"/> Delete	TITLE D NAME Comparetto, Mario STREET ADDRESS 1920 Northgate Blvd #A-7 CITY-ST-ZIP Sarasota, FL 34234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE AS NAME Michael Manning STREET ADDRESS 1877 Northgate Blvd #4 CITY-ST-ZIP Sarasota, FL 34234	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4-20-07</u> Daytime Phone # <u>941-359-4876</u>	