## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 758287** 

FILED Apr 01, 2012 Secretary of State

Entity Name: GOTHA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9561 GOTHA RD

WINDERMERE, FL 34786 US

Current Mailing Address: New Mailing Address:

P O BOX 192

GOTHA, FL 34734 US

FEI Number: 54-1938820 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CHABOT, RALPH S TREASUR 2677 S HEMPEL AVE WINDERMERE, FL 34786 US

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.

iii tile State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: DS

Name: HARGREAVES, DOREEN

Address: 7575 DR PHILLIPS BLVD, SUITE 270

City-St-Zip: ORLANDO, FL 32836

Title: DT

Name: CHABOT, RALPH S Address: P O BOX 505. City-St-Zip: GOTHA, FL 34734

Title: DP

Name: SIMMONS, DENZELL
Address: 1329 DINGENS AVE
City-St-Zip: WINDERMERE, FL 34786

Title:

Name: WERY, CAMILLE Address: 10568 MOORE RD City-St-Zip: GOTHA, FL 34734

Title:

Name: WERY, TELETHE Address: 10568 MOORE RD City-St-Zip: GOTHA, FL 34734

Title: [

Name: ARDAMAN, KURT Address: 1947 LEE RD

City-St-Zip: WINTER PARK, FL 32789

I hereby 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 all other like empowered.

SIGNATURE: RALPH S. CHABOT DT 04/01/2012