

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766644

FILED
Apr 04, 2009
Secretary of State

Entity Name: NORTH GATE ASSOCIATION, INC.

Current Principal Place of Business:

151 SAWGRASS CORNERS DRIVE - SUITE 204G
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2055
PONTE VEDRA, FL 32004

New Mailing Address:

FEI Number: 59-2314560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EWING, JOHN C
151 SAWGRASS CORNERS DRIVE - SUITE 204G
PONTE VEDRA BEACH, FL 32082 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: BVP () Delete
Name: DOUGHERTY, PAUL
Address: 1 NORTH GATE DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DS () Delete
Name: NACHMAN, MARTHA
Address: 26 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DP () Delete
Name: STONE, MARY ANN
Address: 21 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DT () Delete
Name: BRANUM, STEPHEN
Address: 33 NORTHGATE DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TD () Delete
Name: HOLICKY, LYNNE
Address: 15 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SKEEN, FRITZ
Address: 5 NORTH GATE DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change () Addition
Name: DOWNEY, MARGARET
Address: 23 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VPS (X) Change () Addition
Name: STONE, MARY ANN
Address: 21 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

Title: D (X) Change () Addition
Name: HOLICKY, LYNNE
Address: 15 CARRIAGE LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: FRITZ SKEEN

P

04/04/2009

Electronic Signature of Signing Officer or Director

Date