2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #767746

SIGNATURE:

1. Entity Name
SOUTH GATE VILLAGE GREEN CONDOMINIUM, SECTION SEVEN ASSOCIATION, INC.



FILED Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90179 030 ****61.25

JIM WARKEL 4/17/06 941-921-539

1801 GLENG Sarasota, F	E COMMUNITY MGMT, INC Ary Street 1 34231-0603	Mailing Address PROGRESSIVE COMMUNITY MGMT, INC 1801 GLENGARY STREET SARASOTA, FL 34231-0603										
2. Principal P	lace of Business	3. Mailing	3. Mailing Address				! !E1 !E1 E	BHU IBBU UBBU BIBU	o alis esen en el el el			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				02022006 Chg-NP CR2E037 (11/05)						
City & State	9	City &	City & State				4. FEI Number 59-6248			_ 	oplied For ot Applicable	
Zip	Country		Zip Co		untry		5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name and Address of Current	Registered A	red Agent				7. Name and Address of New Registered Agent					
			Name									
PROGRESSIVE COMMUNITY MGMT, INC 1801 GLENGARY STREET SARASOTA, FL 34231			Street Addres			ddress (I	s (P.O. Box Number is Not Acceptable)					
					City				FL	Zip Cod	le	
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												
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees		Make chec Florida Depa	k payable t rtment of S		
10.	OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHA	NGES TO OFF	ICERS AND D	RECTORS IN	l 10	
TITLE	VD		Delete	IIILE	.	50)	20.14	416	Change	Addition	
NAME	GLICKMAN, JOSEPH			NAMI	- I	PH	ILLIPS 86 BRU	PAULI	N 2	115		
STREET ADDRESS CITY-ST-ZIP	3293 BROCKTON LANE SARASOTA, FL 34239				et adoress -st-zip	ろろ	86 BRU	MZMI	CKW	7.00		
	AS					_5A	CASOTA	FFL	342			
TETLE NAME	MARKEL, JIM		☐ Delete	TITLE	I					Change	Addition Addition	
STREET ADDRESS	1801 GLENGARY STR				ET ADDRESS							
CITY-ST-ZIP	SARASOTA, FL 34231		СПУ		-ST-ZIP							
TITLE	AT		☐ Delete	TITLE	E					Change	Addition	
NAME	SUTTON, WILLIAM			NAM	I							
STREET ADDRESS	1801 GLENGARY STREET			STRE	ET ADDRESS							
CITY-ST-ZIP	SARASOTA, FL 34231			CITY	-ST-ZIP							
TITLE	PD		Delete	TITLE	E					☐ Change	☐ Addition	
NAME	HOPKINS, DUFF			NAM								
STREET ADDRESS	3215 BROCKTON LANE			E	ET ADORESS							
CITY-ST-ZIP	SARASOTA, FL 34239			CITY	-ST-ZIP							
TITLE	SD SUBJECT STREET		Delete	IIILE						Change	Addition	
NAME	BURKE, PHYLLIS E 3270 BRUNSWICK LANE			NAM								
STREET ADDRESS CITY-ST-ZIP	SARASOTA, FL 34239				ET ADORESS -ST-ZIP							
			- Index	חונו						☐ Change	Addition	
TITLE NAME	TD Vajta, ann		L Delete	NAM						— ⇔rain%c		
STREET ADDRESS	3235 BROCKTON AVENUE				ET ADORESS							
CITY-ST-ZIP	SARASOTA, FL 34239				-ST-ZIP							
12. I hereby certify that the information supplied with this filling 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 either like empowered.												