2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# 769052

Entity Name: CENTER GATE ESTATES VILLAGE CONDOMINIUM ASSOCIATION, SECTION II, INC.

Current Principal Place of Business:

A O'CONNOR
4427 RUM CAY CIR
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17372
SARASOTA, FL 342760372

New Mailing Address:

FEI Number: 59-2401681 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'CONNOR ARTHUR
4427 RUM CAY CIR
SARASOTA, FL 34233 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: PD ( ) Delete
Name: O'CONNOR, ARTHUR
Address: 4427 RUM CAY CIR
City-St-Zip: SARASOTA, FL 34233

Title: TD ( ) Delete
Name: SCHATZMAN, JAY G
Address: 4445 RUM CAY CIR
City-St-Zip: SARASOTA, FL 34233

Title: SD ( ) Delete
Name: MCMAHON, JUDITH
Address: 4427 RUM CAY CIR
City-St-Zip: SARASOTA, FL 34233

Title: VD1 ( ) Delete
Name: STEARNS, ROBERT
Address: 4458 ATWOOD CAY CR
City-St-Zip: SARASOTA, FL 34233

Title: VD ( ) Delete
Name: MURRAY, DAVID
Address: 4419 RUM CAY CIR.
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ARTHUR O'CONNOR PD 01/28/2009
Electronic Signature of Signing Officer or Director Date