

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005443

FILED
Apr 26, 2009
Secretary of State

Entity Name: GATELY OAKS UNIT FIVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12485 MARIAH ANN CT S
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12485 MARIAH ANN CT S
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3721748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVENPORT, PHYLLIS J
12485 MARIAH ANN CT S
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

D, PHYLLIS J
12485 MARIAH ANN CT S
JACKSONVILLE, FL 32225 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.

SIGNATURE: KATHLEEN WHITE

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DAVENPORT, PHYLLIS J
Address: 12485 MARIAH ANN CT S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DS () Delete
Name: DERMODY, DEBORAH
Address: 1631 MARIAH ANN CT
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT () Delete
Name: EDWARDS, DAVID
Address: 12421 MARIAH ANN CRT S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DV () Delete
Name: WHITE, KATHLEEN
Address: 12472 MARIAH ANN CRT S
City-St-Zip: JACKSONVILLE, FL 32225

Title: MAL () Delete
Name: DAMATO, BRUCE
Address: 12493 MARIAH ANN CT S
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: WHITE, KATHLEEN
Address: 12472 MARIAH ANN CRT S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DV (X) Change () Addition
Name: DAMATO, BRUCE
Address: 12493 MARIAH ANN CRT S
City-St-Zip: JACKSONVILLE, FL 32225

Title: MAL (X) Change () Addition
Name: KEISTER, WARREN
Address: 12498 MARIAH ANN CT S
City-St-Zip: JACKSONVILLE, FL 32225

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: KATHLEEN WHITE

DT

04/26/2009

Electronic Signature of Signing Officer or Director

Date