2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N01000004043

Entity Name: WHITEGATE ESTATES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

10305 U.S. 1 SOUTH
SEBASTIAN, FL 32958

New Principal Place of Business:

1277 N SEMORAN BLVD
SUITE119
ORLANDO, FL 32807

Current Mailing Address:

10305 U.S. 1 SOUTH
SEBASTIAN, FL 32958

New Mailing Address:

1277 N SEMORAN BLVD
SUITE 119
ORLANDO, FL 32807

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

H. WAYNE KLEKAMP, INC.
1561 MIZELL AVE
WINTER PARK, FL 32789

Name and Address of New Registered Agent:

H. WAYNE KLEKAMP, INC.
441 GENIUS DRIVE
WINTER PARK, FL 32789

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: _____ 04/30/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: H. WAYNE KLEKAMP,
Address: 1561 MIZELL AVE
City-St-Zip: WINTER PARK, FL 32789

Title: STD ( ) Delete
Name: KLEKAMP, DIANNE M
Address: 1561 MIZELL AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete
Name: HUDSON, DOROTHY A ESQ.
Address: 2903 CARDINAL DRIVE
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: H. WAYNE KLEKAMP,
Address: 441 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: STD (X) Change ( ) Addition
Name: KLEKAMP, DIANNE M
Address: 441 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: H WAYNE KLEKAMP PD 04/30/2004
Electronic Signature of Signing Officer or Director — Date