

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

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000006920

1. Entity Name

SOUTHGATE PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

102 W PINELOCH STREET SUITE 10
ORLANDO, FL 32806

Mailing Address

102 W PINELOCH STREET SUITE 10
ORLANDO, FL 32806



01172006 No Chg-NP

CR2E037 (11/05)

4. FEI Number

59-3749566

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CARUSO, JAMES P
102 W PINELOCH STREET SUITE 10
ORLANDO, FL 32806

**DO NOT WRITE
IN THIS SPACE**

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, types 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

10. OFFICERS AND DIRECTORS

TITLE D
NAME CARUSO, JAMES P
STREET ADDRESS 102 W PINELOCH STREET SUITE 10
CITY-ST-ZIP ORLANDO, FL 32806

TITLE D
NAME CARUSO, J. PAUL
STREET ADDRESS 102 W PINELOCH STREET SUITE 10
CITY-ST-ZIP ORLANDO, FL 32806

TITLE D
NAME CARUSO, PHYLLIS P
STREET ADDRESS 102 W PINELOCH STREET SUITE 10
CITY-ST-ZIP ORLANDO, FL 32806

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000501462
04/25/06-80063-019 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

James P. Caruso

4/6/06

407-859-3580