## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Feb 04, 2008 8:00 am **Secretary of State** DOCUMENT # N02000009722 02-04-2008 90048 016 \*\*\*\*61.25 GATÉWAY CENTER OF DAYTONA BEACH OWNERS' ASSOCIATION INC. Principal Place of Business Mailing Address 1530 CORNERSTONE BLVD. PO BOX 10809 **STE 100** DAYTONA BEACH, FL 32120-0809 DAYTONA BEACH, FL 32117 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 01082008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Numbe Applied For 55-0811174 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name APGAR, ROBERT F Street Address (P.O. Box Number is Not Acceptable) 1530 CORNERSTONE BLVD. STE 100 DAYTONA BEACH, FL 32117 City 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 Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D۷ TITLE ☐ Delete TITLE ☐ Addition MCMUNN, WILLIAM H NAME NAME STREET ADDRESS 1530 CORNERSTONE BLVD. STE 100 STREET ADORESS CITY-ST-ZIP DAYTONA BEACH, FL 32117 CITY-ST-ZIP DP ☐ Delete Change TITLE TITLE ☐ Addition DV GARN, TED NAME NAME STREET ADDRESS 1530 CORNERSTONE BLVD STE 100 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32117 CITY-ST-ZIP TITLE DST ☐ Delete TITLE Change ☐ Addition NAME CRISP, LINDA NAME STREET ADDRESS 1530 CORNERSTONE BLVD STE 100 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32117 CITY-ST-ZIP TITLE AS ☐ Delete TITLE ☐ Change ☐ Addition GARY, MARISA STREET ADDRESS 1530 CORNERSTINE BLVD. STE. 100 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32117 CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition MOOTHART, GARY STREET ADDRESS STREET ADDRESS 1530 CORNERSTONE BLVD STE 100 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH, FL TITLE □ Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 of 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 or an attachment with an address, with all other like empowered.

CITY-SI-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-7IP

Linda Crisp, Secretary

2/1/08

386-274-2202

**FILED**