

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09347

FILED
Jan 09, 2009
Secretary of State

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

Current Principal Place of Business:

3707 RADNOR PLACE
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

3707 RADNOR PLACE
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 59-2614267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROKOP P.A.
3707 RADNOR PLACE
SARASOTA, FL 34232 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: SCHAEFER, JOHN
Address: 4432 CAYO GRANDE DRIVE
City-St-Zip: SARASOTA, FL 34233

Title: SD () Delete
Name: NORMANDIE, ROBERT
Address: 4410 CAYO GRANDE
City-St-Zip: SARASOTA, FL 34233

Title: VD () Delete
Name: RICHARDS, DAVE
Address: 4464 CAYO GRANDE
City-St-Zip: SARASOTA, FL 34233

Title: TD () Delete
Name: DOUGLASS, JOHN
Address: 4546 ATWOOD CAY CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: GALLO, CHARLES
Address: 4490 CAYO GRANDE
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GALLO, CHARLES
Address: 4490 CAYO GRANDE
City-St-Zip: SARASOTA, FL 34233

Title: SD (X) Change () Addition
Name: JANOVSKY, ELIZABETH
Address: 4584 ATWOOD CAY
City-St-Zip: SARASOTA, FL 34233

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

Title: TD (X) Change () Addition
Name: LETTERS, SALLY
Address: 4574 ATWOOD CAY
City-St-Zip: SARASOTA, FL 34233

Title: D (X) Change () Addition
Name: DORMAN, LARRY
Address: 4444 CAYO GRANDE
City-St-Zip: SARASOTA, FL 34233

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: KENNETH D. PROKOP

RA

01/09/2009

Electronic Signature of Signing Officer or Director

Date