

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 17 PM 4:03

DOCUMENT # **N18438** (4)
1. Corporation Name
NORTHGATE PROPERTY OWNERS ASSOCIATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5728 MAJOR BLVD
STE 301
ORLANDO FL 32819-7996
US

5728 MAJOR BLVD
STE 301
ORLANDO FL 32819-7996
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/24/1986

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2898721

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
Ste 306

25 Suite, Apt. #, etc.
Ste 306

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRAY, SUZETTE M.
5728 MAJOR BLVD.
SUITE 301
ORLANDO FL 32819

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 Suite 306

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
GRAY, SUZETTE M
5728 MAJOR BLVD, STE 301
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
JAHRAUS, GARY E
5728 MAJOR BLVD, STE 301
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
TREADWELL, DAVID L
5728 MAJOR BLVD, STE 301
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
☒ Change ☐ Addition
Ste 306

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
☒ Change ☐ Addition
Ste 306

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
☒ Change ☐ Addition
Ste 306

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 registered agent empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, as applicable, or on an attachment to this report.

SIGNATURE:

Gary E. Jahraus

4/5/95

(407)351-1111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number