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Apr 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N18980 (5)
1. Corporation Name
GREENGATE "IV" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

13351 GREENGATE BLVD.
FT MYERS FL 33919
US

Mailing Address

% BENSON'S
12650 WHITEHALL DR
FT MYERS FL 33907-3619
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 90 ERICKSON REALTY

Suite, Apt. #, etc.

27 8695 COLLEGE PKWY - 310

City & State

28 FT. MYERS FL.

Zip

29 33919

Country

30 USA

3. Date Incorporated or Qualified
01/28/1987

3a. Date of Last Report
04/05/1996

4. FEI Number

65-0039380

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENSON, MARK R.
12650 WHITEHALL DRIVE
FT MYERS FL 33907

81 Name

ERICKSON REALTY, INC

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

ERICKSON DONALD I

83

8695 COLLEGE PKWY - STE 310

84 City

FT MYERS

FL

85 Zip Code

33919

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/3/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GORDON, ROBERT
STREET ADDRESS 13351 GREENGATE BLVD. #426
CITY - ST - ZIP FORT MYERS FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME SNYDER, JEAN
STREET ADDRESS 13351 GREENGATE BLVD #417
CITY - ST - ZIP FT MYERS FL

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE STD
NAME DODD, JEAN
STREET ADDRESS 13351 GREENGATE BLVD #418
CITY - ST - ZIP FT MYERS FL

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: R. GORDON R. GORDON President 1-7-97 9794-4329447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone & FVSE/170

CR2E037 (9/96)