2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

3/7

FILED
Apr 04, 2007 8:00 am
Secretary of State
03-21-2007 90031 049 ****61.25

DOCUMENT # N24493

1. Entity Name
VILLAS AT GATOR TRACE HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4168 A GATOR TRACE FT. PIERCE, FL 34982 US	4168 A GATOR TRACE FT. PIERCE, FL 34982 US

02172007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0082326 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BRUNNER, JANET 4168-A GATOR TRACE VILLAS CIRCLE FT PIERCE, FL 34982	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Janet E. Brunner 2-20-07
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
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BROGA, PAUL 417A GATOR TR VILLAS CR FORT PIERCE, FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CONSTANCE ROCK - DIR. 4166B GATOR TR VILLAS CR. FORT PIERCE, FL 34982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CAWTHORNE, DALE 4176 B GATOR TRACE VILLAS CR FORT PIERCE, FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SHIRLEY BROGA - TREAS 4174A GATOR TR. VILLAS CR. FORT PIERCE, FL 34982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WORTHING, MARIE 4178 A GATOR TRACE VILLAS CR FT. PIERCE, FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	NANCY LONG - DIR 4173C. GATOR TRACE VILLAS CR. FORT PIERCE, FL 34982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OWEN, HAROLD 4174B GATOR TR VILLAS CR FORT PIERCE, FL 34982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WISTON, MARK 4343 GATOR TR CIR FORT PIERCE, FL 34982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEWIS, JANE 4183 A COATOR TRACE VILLAS CR. FORT PIERCE, FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Shirley W. Broga 4/3/07
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR Date Daytime Phone #