2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 17, 2008 8:00 am Secretary of State 04-17-2008 90039 044 ****61.25 DOCUMENT # N24720 GATÉWAY GREENS COMMUNITY ASSOCIATION, INC. 4001014 Principal Place of Business Mailing Address 3050 HORSHOE DR. NORTH 3050 Norshoe dr. North STF 275 NAPLES, FL 34101 NAPLES, FL 34101 2. Principal Place of Business - No PO Boy # Alliant Property Management, LLC Alliant Property Management, LLC 6719 Winkler Rd. Suite 200 6719 Winkler Rd. Suite 200 Fort Myers, FL 33919 Fort Myers, FL 33919 6. Name and Address of Current Registered Agent Nar BECKER & POLIAKOFF, P.A. ATTN: JOSEPH E. ADAMS, ESQ 14241 METROPOLIS AVENUE SUITE 100 Stre Alliant P 6719 Wi FORT MYERS, FL 83912 Fort My 8. The above named entity submits this statement for the purpose of changing its registered office or registered SIGNATURE (NOTE: Registered Agent signature required wi 9. Election Campaign Financing Filing Fee is \$61.25 Due by May 1, 2008 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. AD TITLE Delete TITLE VPDSUTHERLAND, BOB NAME NAME 11100 12021 BRASSIC CIRCLE #201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33913 CITY-ST-ZIP Ft M TITLE Delete TITLE TD F PFERRER, ADRIAN NAME NAME 12007 STREET ADDRESS 12540 VENICIA DRIVE STREET ADDRESS F+N CITY-ST-ZIP FORT MYERS, FL 33913 CITY-ST-7IP TITLE TITLE SD Delete. NAME DELIHAS, SUSAN NAME 1256 11228 CALLAWAY STREET ADDRESS STREET ADDRESS FORT MYERS, FL 33913 F+M CITY-ST-ZIP CITY-ST-ZIP PD Ł TITLE ☐ Delete TITLE MAXWELL, KAREN NAME NAME STREET ADORESS 12037 BRASSIE CIRCLE #201 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33913 CITY-ST-ZIP TITLE TITLE DΒ Delete LORENZ, PAUL 1255 12010 ROSEMOUNT DRIVE STREET ADORESS STREET ADDRESS F+N CITY-ST-ZIP FT. MYERS, FL 33913 CITY-ST-ZIP

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 affachment with an address, with all other like empowered 235-

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

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03252008 Chg-NP CR2E037 (12/06)				
4. FEI Number 65-0040944				Applied For
		\$8.75	Not Applicable	
5. Certificate of Status Desired				
7. Name and Address of New Registered Agent				
Property Management, LLC				
ers, FL 33919				
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5.00 May Be dded to Fees	Make check payable to Florida Department of State			
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