

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90180 004 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # N28345</b><br>1. Entity Name<br><b>GOLD TREE COMMUNITIES HOMEOWNERS ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |
| Principal Place of Business<br><b>GOLD TREE HOA<br/>5707 45TH ST<br/>BRADENTON, FL 34203 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            |                                                                                                                                                  | Mailing Address<br><b>GOLD TREE HOA<br/>P.O. BOX 21163<br/>BRADENTON, FL 34203 US</b>                                                                                                                                                 |                                                                                                 |  |
| 2. Principal Place of Business<br><b>5707 45th St E. # 44</b><br>Suite, Apt. #, etc.<br><b>Bradenton</b><br>City & State<br><b>FLA</b><br>Zip<br><b>34203</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            | 3. Mailing Address<br><b>5707 45th St E # 44</b><br>Suite, Apt. #, etc.<br><b>Bradenton</b><br>City & State<br><b>FLA</b><br>Zip<br><b>34203</b> |                                                                                                                                                                                                                                       | 03292005 Chg-NP CR2E037 (10/03)                                                                 |  |
| 4. FEI Number<br><b>65-0076184</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            | Applied For<br><input type="checkbox"/> Not Applicable                                                                                           |                                                                                                                                                                                                                                       | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
| 6. Name and Address of Current Registered Agent<br><b>SCOTTO, THERESA<br/>5707 45TH ST., E. #263<br/>BRADENTON, FL 34203</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                            |                                                                                                                                                  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                                                 |  |
| 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.<br>SIGNATURE: <u><i>Theresa Scott</i></u> DATE: <u>3/31/05</u><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when withdrawing)</small>                                                                                                                                                                                         |                                            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |
| Filing Fee is \$81.25<br>Due by May 1, 2005                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                            | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/>                                                              |                                                                                                                                                                                                                                       | \$5.00 May Be<br>Added to Fees                                                                  |  |
| Make check payable to<br>Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            |                                                                                                                                                  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                                                                                                                 |                                                                                                 |  |
| TITLE<br>P<br>NAME<br>MCARDLE, ROY<br>STREET ADDRESS<br>5707 45TH ST., E. #73<br>CITY-ST-ZIP<br>BRADENTON, FL 34209                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> Delete |                                                                                                                                                  | TITLE<br>mullin, Paul<br>NAME<br>5707 45th St E. #44<br>STREET ADDRESS<br>Bradenton FL, 34203<br>CITY-ST-ZIP                                                                                                                          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                    |  |
| TITLE<br>VP<br>NAME<br>MULLIN, PAUL<br>STREET ADDRESS<br>5707 45TH ST. E. #44<br>CITY-ST-ZIP<br>BRADENTON, FL 34263                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> Delete |                                                                                                                                                  | TITLE<br>Neff, Don<br>NAME<br>5707 45th St, E. #20<br>STREET ADDRESS<br>Bradenton FL, 34203<br>CITY-ST-ZIP                                                                                                                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                    |  |
| TITLE<br>S<br>NAME<br>WIBLE, MARSHA<br>STREET ADDRESS<br>5707 45TH ST E LOT 237<br>CITY-ST-ZIP<br>BRADENTON, FL 34203                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> Delete |                                                                                                                                                  | TITLE<br>Steuerman, Beth<br>NAME<br>5707 45th St E. #292<br>STREET ADDRESS<br>Bradenton, FL, 34203<br>CITY-ST-ZIP                                                                                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                    |  |
| TITLE<br>T<br>NAME<br>SCOTTO, THERESA<br>STREET ADDRESS<br>5707 45TH ST., E. #268<br>CITY-ST-ZIP<br>BRADENTON, FL 34203                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete            |                                                                                                                                                  | TITLE<br>Wingard, Joyce<br>NAME<br>5707 45th St E. #69<br>STREET ADDRESS<br>Bradenton, FL, 34203<br>CITY-ST-ZIP                                                                                                                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                    |  |
| TITLE<br>D<br>NAME<br>WALLACE, KEN<br>STREET ADDRESS<br>5707 45TH ST., E. #199<br>CITY-ST-ZIP<br>BRADENTON, FL 34203                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Delete |                                                                                                                                                  | TITLE<br>Allen Beck, Al<br>NAME<br>5707 45th St E. #132<br>STREET ADDRESS<br>Bradenton FL, 34203<br>CITY-ST-ZIP                                                                                                                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                    |  |
| TITLE<br>D<br>NAME<br>HIGGINS, JACK<br>STREET ADDRESS<br>5707 45TH ST., E. #181<br>CITY-ST-ZIP<br>BRADENTON, FL 34203                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u><i>Karl B. Mullin</i></u> <u>April 1, 2005</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                                                                                                                                  |                                                                                                                                                                                                                                       |                                                                                                 |  |