


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90120 050 ****61.25

DOCUMENT # N28345 1. Entity Name GOLD TREE COMMUNITIES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 5707 45 ST E. #44 BRADENTON, FL 34203 US			Mailing Address 5707 45 ST E. #44 BRADENTON, FL 34203 US		
2. Principal Place of Business <i>GOLD TREE Homeowners Assn.</i> Suite, Apt. #, etc. <i>5707 45 St E</i> City & State <i>Bradenton Florida</i> Zip <i>34203</i> Country <i>MANTEE</i>		3. Mailing Address <i>Same</i> Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 65-0076184				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCOTTO, THERESA 5707 45TH ST., E. #263 BRADENTON, FL 34203			7. Name and Address of New Registered Agent Name <i>THERESA SCOTTO</i> Street Address (P.O. Box Number is Not Acceptable) <i>5707 45 St. E</i> <i>LOT # 263</i> City <i>BRADENTON FL 34203</i> Zip Code <i>34203</i>		
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 <i>Theresa Scott</i> 3-14-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P MULLIN, PAUL 5707 45TH ST E #44 BRADENTON, FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Same</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NEFF, DON 5707 45TH ST E. #20 BRADENTON, FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Same</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEINMAN, BETH 5707 45TH ST E. #292 BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Mrs Betty Miller</i> <i>5707 45th St E. #37</i> <i>Bradenton FL 34203</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCOTTO, THERESA 5707 45TH ST., E. #268 BRADENTON, FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Same</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINGORD, JOYCE 5707 45TH ST E #292 BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>MARY JANE TOMCALA</i> <i>5707 45th St E</i> <i>BRADENTON FLA 34203</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIGGINS, JACK 5707 45TH ST., E. #181 BRADENTON, FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Mr Chet Miller</i> <i>5707 45th St E. #37</i> <i>Bradenton, FL 34203</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: <i>THERESA SCOTTO</i> <i>Theresa Scott</i> 3/14/06 94173-N66 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					