

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N31946 (9)
1. Corporation Name
THE GARDEN VILLAS AT GATOR TRACE OF ST. LUCIE HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business 4078 GATOR TRACE ROAD FT. PIERCE FL 34982 US	Mailing Address 4078 GATOR TRACE ROAD FT. PIERCE FL 34982 US
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3. Date Incorporated or Qualified
04/26/1989

4. FEI Number 65-0191725	Applied For ☐	Not Applicable ☐
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SUNBERG, DICK
4078 GATOR TRACE ROAD
FORT PIERCE FL 34982**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 **RICHARD SUNDBERG, TREASURER**

02/09/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DEBOR, BOB 4054 GARDEN VILLAS COURT FT. PIERCE FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SUNDBERG, DICK 4078 GATOR TRACE ROAD FT. PIERCE FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FOSTER, AL 4070 GARDEN VILLAS CT. FT. PIERCE FL	☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SCIACCO, KAY 4045 GATOR TRACE ROAD FT. PIERCE FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DEBOR, BOB 4054 GARDEN VILLAS COURT FT. PIERCE FL	☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RENALDY, CARMEN 4089 GARDEN VILLAS COURT FORT PIERCE FL	☐ DELETE

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DVP PETERSON, DAVID 4071 GARDEN VILLAS CT. FT. PIERCE, FL 34982	☐ Change ☒ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I 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: *Richard Sundberg* **RICHARD SUNDBERG**

561 461-7062 02/02/98

CP2E037 (10/97)