

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32928

FILED  
Feb 07, 2009  
Secretary of State

**Entity Name:** GATOR ROAD MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

7851 SUPPLY DRIVE  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

7600 ALICO ROAD  
12-51  
FORT MYERS, FL 33912

**New Mailing Address:**

7851 SUPPLY DRIVE  
FORT MYERS, FL 33912

**FEI Number:** 65-0129039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILES, MARK  
7851 SUPPLY DRIVE  
FORT MYERS, FL 33912 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: PAUL, LISA  
Address: 7600 ALICO RD 12-51  
City-St-Zip: FORT MYERS, FL 33912

Title: V ( ) Delete  
Name: NICHOLAS, BRUCE  
Address: 7600 ALICO RD.  
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Delete  
Name: WILES, MARK  
Address: 7851 SUPPLY DR  
City-St-Zip: FORT MYERS, FL 33912

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ST (X) Change ( ) Addition  
Name: PAUL, LISA  
Address: 4200 GULF SHORE BLVD N  
City-St-Zip: NAPLES, FL 34103

Title: V (X) Change ( ) Addition  
Name: NICHOLAS, BRUCE  
Address: 8090 SUPPLY DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK WILES

P

02/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date