

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$165 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

**NONPROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUL -3 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42824 (5)

1. Corporation Name

SOUTHGATE APARTMENTS NON-PROFIT HOUSING, INC.

Principal Place of Business

Mailing Address

4610 CENTRAL AVE
TAMPA FL 33603

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TAMPA FL 33603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/04/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**FILING FEE IS
\$61.25**

8. This corporation has liability for intangible tax under s. 100.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEFOUR, GEORGE A.
4610 CENTRAL AVE
TAMPA FL 33603

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD
NAME	SIGISMUND, STANLEY P
STREET ADDRESS	8006 GREENSHIRE DR
CITY - ST - ZIP	TAMPA FL
TITLE	SVD
NAME	REYNOLDS, JERRY
STREET ADDRESS	11723 PRIMROSE DR.
CITY - ST - ZIP	TEMPLE TERRACE FL
TITLE	D
NAME	HAWKINS, LEONARD
STREET ADDRESS	5352 CHARLOTTE AVENUE
CITY - ST - ZIP	NEW PORT RICHEY FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	Director	XX Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY - ST - ZIP		
21 TITLE	Treasurer, Director	XX Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		
31 TITLE	President, Director	XX Change XX Addition
32 NAME	Eleanor Wasko	
33 STREET ADDRESS	5326 A4 Charlotte Ave	
34 CITY - ST - ZIP	New Port Richey, FL 34652	
41 TITLE	Hertha Drinkwater, Secretary, DTR	Change XX Addition
42 NAME	5412 B3 Charlotte Ave	
43 STREET ADDRESS	New Port Richey, FL 34652	
44 CITY - ST - ZIP		
51 TITLE	Catherine M Collins, Director	Change XX Addition
52 NAME	5337 B2 Charlotte Ave	
53 STREET ADDRESS	New Port Richey, FL 34652	
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information identified 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 *Jerald Reynolds* 6-27-95 817-881-9199
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

CR2E037 (3/95)