

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90053 007 ****61.25

DOCUMENT # N47861

1. Entity Name
**GATLIN PLACE HOMEOWNERS ASSOCIATION OF
ORANGE COUNTY, INC.**



Principal Place of Business
**P O BOX 561629
ORLANDO, FL 32856-1629 US**

Mailing Address
**P O BOX 561629
ORLANDO, FL 32856-1629 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01252008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3074394

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FLOWERS, KEN
3427 GATLIN PLACE CIR.
ORLANDO, FL 32812**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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
FLOWERS, KEN
3457 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
O'Keefe, Michael
3690 Gatlin Place Cir
Orlando, FL 32812** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
ADKINS, FRED
3752 CATLIN PL CIR
ORLANDO, FL 32812** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Fredenick Adkins
3752 Gatlin Place Cir
Orlando, FL 32812** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DOWNING, DANA
3741 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANDERSON, RICHARD
3404 GATLIN PLACE CIR.
ORLANDO, FL 32812** ☒ Delete

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:

[Signature]

Fredenick Adkins

1/26/08

407-273-7181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #