

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N93000005472 (6)

1. Corporation Name

SOUTH GATE VILLAGE GREEN CONDOMINIUM SECTION THREE ASSOCIATION, INC.

FILED

95 JAN 25 PM 12:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3636 VILLAGE GREEN DRIVE
SARASOTA FL 34239

3636 VILLAGE GREEN DRIVE
SARASOTA FL 34239

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/06/1993

3a. Date of Last Report

03/14/1994

4. FEI Number

59-1321257

Applied For

Not Applicable

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

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOBECK, DANIEL J
2063 MAIN STREET
SUITE 101
SARASOTA FL 34237

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

CURTISS-DILLON, ELAINE

STREET ADDRESS

3636 VILLAGE GREEN DRIVE

CITY - ST - ZIP

SARASOTA FL 34239

TITLE

D

NAME

MCDONALD, HELEN

STREET ADDRESS

3289 GIFFORD LANE

CITY - ST - ZIP

SARASOTA FL 34239

TITLE

D

NAME

BORST, MARCELLA

STREET ADDRESS

3254 SUFFOLK LANE

CITY - ST - ZIP

SARASOTA FL 34239

TITLE

D

NAME

WILLEVER, DONALD

STREET ADDRESS

3272 SUFFOLK LANE

CITY - ST - ZIP

SARASOTA FL 34239

TITLE

D

NAME

CORRIGAN, MARILYN

STREET ADDRESS

3656 VILLAGE GREEN DRIVE

CITY - ST - ZIP

SARASOTA FL 34239

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P/D

☐ Change ☒ Addition

1.2 NAME

Curtiss-Dillon, Elaine

1.3 STREET ADDRESS

3636 Village Green Drive

1.4 CITY - ST - ZIP

Sarasota FL 34239

2.1 TITLE

T/D

☐ Change ☒ Addition

2.2 NAME

McDonald, Helen

2.3 STREET ADDRESS

3289 Gifford Lane

2.4 CITY - ST - ZIP

Sarasota FL 34239

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 118.07(3)(h), 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:

Helen M. McDonald, Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/95

813-922-5443