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May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000001371 (3)**

1. Corporation Name

TOWNHOMES ON THE GREEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 2825 N.W. 104TH CT. #D GAINESVILLE FL 32606	Mailing Address 2825 N.W. 104TH CT #B GAINESVILLE FL 32606
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3. Date Incorporated or Qualified

03/14/1994

4. FEI Number

59-3249660

Applied For

Not Applicable

2. Principal Place of Business 21 2825 N.W. 104th Ct Suite, Apt. #, etc. #D City & State 23 GAINESVILLE, FL Zip 24 32606 Country 25 ALACHUA	2a. Mailing Address 26 2825 N.W. 104th Ct Suite, Apt. #, etc. #D City & State 28 GAINESVILLE, FL Zip 29 32606 Country 30 ALACHUA
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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

**SLATTERY, JAMES
2825 N.W. 104TH CT.
#B
GAINESVILLE FL 32606**

81 Name **SYLVIA GENTILE**

82 Street Address (P.O. Box Number is Not Acceptable)
2825 N.W. 104th Ct #D

83

84 City **GAINESVILLE**

FL

85 Zip Code **32606**

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 **Sylvia Gentile (Sylvia Gentile)**

April 21, 1998

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 DP	☒ DELETE	1.1 TITLE D/P Jean Powell	☐ Change ☒ Addition
NAME SLATTERY, JAMES		1.2 NAME 2825 N.W. 104th Ct #A	
STREET ADDRESS 2825 N.W. 104TH CT. #B		1.3 STREET ADDRESS GAINESVILLE, FL 32606	
CITY-ST-ZIP GAINESVILLE FL 32606		1.4 CITY-ST-ZIP	
TITLE DST	☐ DELETE	2.1 TITLE DST	☒ Change ☐ Addition
NAME GENTILE, SYLVIA		2.2 NAME GENTILE, SYLVIA	
STREET ADDRESS 2825 W. 104TH CT., #D		2.3 STREET ADDRESS 2825 N.W. 104th Ct #D	
CITY-ST-ZIP GAINESVILLE FL 32606		2.4 CITY-ST-ZIP GAINESVILLE, FL 32606	
TITLE DVP	☒ DELETE	3.1 TITLE S/	☐ Change ☐ Addition
NAME LLOYD, JEFF		3.2 NAME	
STREET ADDRESS 2825 N.W. 104TH CT., #A		3.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32606		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

Sylvia Gentile Secretary/Pres. Inc. April 21, 1998 (352) 321-3270

CR2E037 (1097)