

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90083 035 ****61.25

DOCUMENT # N95000003489

1. Entity Name



**THE COTTAGES AT GATEWAY GREENS HOMEOWNERS
ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

8359 BEACON BLVD
#409
FORT MYERS FL 33907
US

8359 BEACON BLVD
#409
FORT MYERS FL 33907
US

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

8359 BEACON BLVD

3. Mailing Address

8359 BEACON BLVD

Suite, Apt. #, etc.

Suite 417

Suite, Apt. #, etc.

Suite 417

City & State

FORT MYERS, FL 33907

City & State

FORT MYERS, FL

Zip

33907

Country

USA

Zip

33907

Country

USA

4. FEI Number

65-0619349

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NASSIOY, SHERRY
8359 BEACON BLVD #409
FORT MYERS FL 33907**

7. Name and Address of New Registered Agent

Name

NASSIOY, SHERRY

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

8359 BEACON BLVD

Suite 417

City

FORT MYERS, FL

FL

Zip Code

33907

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

Sherry Nassioy

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

Sherry Nassioy

(NOTE: Registered Agent signature required when re-registering)

4/5/07

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2007

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

TITLE PD ☒ Delete
NAME WADDER, GEORGE E
STREET ADDRESS 12060 FAIRWAY POINTE LANE
CITY-ST-ZIP FORT MYERS FL 33913

TITLE VP ☐ Delete
NAME SCHOMER, PHILLIP
STREET ADDRESS 12020 FAIRWAY POINTE LN
CITY-ST-ZIP FORT MYERS FL 33913

TITLE ST ☒ Delete
NAME BATTAGLIA, THOMAS G
STREET ADDRESS 11651 WEST LINKS DRIVE
CITY-ST-ZIP FORT MYERS FL 33913

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☐ Change ☒ Addition
NAME DAVID J. WADOVICK
STREET ADDRESS 12030 FAIRWAY POINTE LN.
CITY-ST-ZIP FT. MYERS, FL 33913

TITLE PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME MARTIN NATER T/S
STREET ADDRESS 12081 FAIRWAY POINTE LN
CITY-ST-ZIP FT. MYERS, FL 33913

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Philip G. Schom

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/07

Date

Deputy Phone #