2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N99000002356 02-01-2005 90030 049 ****70.00 GAETA COMMERCIAL CENTER ASSOCIATION, INC. Principal Place of Business Mailing Address 3394 CERRITO CT 3394 CERRITO CT 30009136 NAPLES, FL 34109 NAPLES, FL 34109 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 01232005 Chg-NP CR2E037 (10/03) City & State City & State FEI Number 59-2511952 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEARSE, RICHARD L JR Street Address (P.O. Box Number is Not Acceptable) 1239 MYRTLE AV CLEARWATER, FL 33756 City Zio 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed by printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be П Trust Fund Contribution. Due by May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Addition Change Calvin Gaeta NAME GAETA, C CALVIN NAME 13055 Pond Apple Dr. E. STREET ADDRESS 2394 GERRITO GT STREET ADDRESS Naples, FL 34119 CITY-ST-ZIP NAPLES, FL 34109 CITY-ST-ZIP D ☐ Delete ☐ Change TITLE TITLE ☐ Addition PEARSE, RICHARD L JR NAME NAME STREET ADDRESS 1449 WETHERINGTON WAY STREET ADDRESS PALM HARBOR, FL 33756 CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Addition ☐ Change **GAETA, DOLORES** NAME NAME STREET ADDRESS 3394 CERRITO CT STREET ADDRESS CITY-ST-ZIP **NAPLES, FL. 34109** CITY-ST-ZIP TITLE C Oelete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Detete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TID F Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 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 charged, or on an attachment with an address, with all other like grippowered.

FILED

Feb 01, 2005 8:00 am