

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01877

**FILED**  
**Mar 26, 2019**  
**Secretary of State**  
**1172967114CC**

**Entity Name:** THE GABLES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

226 SOUTH LINCOLN AVE  
TAMPA, FL 33609-3047

**Current Mailing Address:**

224 SOUTH LINCOLN AVE  
TAMPA, FL 33609-3047 US

**FEI Number:** 59-3088371

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

GARCIA, PATRICIA H  
226 SOUTH LINCOLN AVE  
TAMPA, FL 33609-3047 US

*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.*

**SIGNATURE:** PATRICIA H GARCIA

03/26/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, S  
Name MULLINS, WESLY L  
Address 220 SOUTH LINCOLN AVE  
City-State-Zip: TAMPA FL 33609

Title D, T  
Name CLINEBELL, DONAMAE  
Address 224 SOUTH LINCOLN AVE  
City-State-Zip: TAMPA FL 33609-3047

Title DIRECTOR/PRESIDENT  
Name AYO-HODSON, ROSIE  
Address 226 SOUTH LINCOLN AVE  
City-State-Zip: TAMPA FL 33609-3047

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DONAMAE CLINEBELL

**TREASURER**

03/26/2019

Electronic Signature of Signing Officer/Director Detail

Date