2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
May 04, 2006 8:00 am
Secretary of State

04-17-2006 90408 033 ****61.25

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1. Entity Name
NICKLAUS MANOR COMMUNITY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1111 3RD AVENUE WEST SUITE 300 BRADENTON, FL 34205	1111 3RD AVENUE WEST SUITE 300 BRADENTON, FL 34205

03232006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
9916 E. Harry		9916 E. Harry	
Suite, Apt. #, etc.: Suite 104		Suite, Apt. #, etc.: Suite 104	
City & State: Wichita KS		City & State: Wichita KS	
Zip: 67207	Country: USA	Zip: 67207	Country: USA

4. FEI Number: 32-0172532 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEITRICH, DAVID K
1111 3RD AVENUE WEST
SUITE 300
BRADENTON, FL 34205

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE: Manager NAME: Kevin Daves STREET ADDRESS: 9916 E. Harry, Suite 104 CITY-ST-ZIP: Wichita, KS 67207	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Kevin Daves 4/1/06 316 686-2290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #