


FILE NOW: FILING FEE IS \$61.25

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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N24990 (6)
 1. Corporation Name
KELLY GREENS COMMUNITY ASSOCIATION I, INC.

Principal Place of Business Mailing Address
~~12001 NEW BRITANNY BLVD~~
~~FT MYERS FL 33907~~
~~US~~
~~12001 NEW BRITANNY BLVD~~
~~FT MYERS FL 33907~~
~~US~~



2. Principal Place of Business	2a. Mailing Address
21 16681 MCGREGOR BLVD	26 16681 MCGREGOR BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 SUITE 207	27 SUITE 207
City & State	City & State
23 FORT MYERS FL	28 FORT MYERS FL
Zip 33908 Country USA	Zip 33908 Country USA

3. Date Incorporated or Qualified	02/23/1988
4. FEI Number	65-0106188
Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
OTILPHEN, PETER 12001 NEW BRITANNY BLVD FT MYERS FL 33907	81 Name BEATRICE DILLER/TOP MANAGEMENT 82 Street Address (P.O. Box Number is Not Acceptable) 16681 MCGREGOR BLVD 83 SUITE 207 84 City FORT MYERS FL FL 85 Zip Code 33908

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 *Beatrice Diller* BEATRICE DILLER, C.A.M. 4-17-98
 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATTON, DONALD	1.2 NAME	
STREET ADDRESS	12601 KELLY SANDS WAY #408	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERS, ROBERT	2.2 NAME	
STREET ADDRESS	12621 KELLY SANDS WY #315	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL 33908	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURNS, FRANK	3.2 NAME	
STREET ADDRESS	12641 KELLY SANDS WY #228	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33908	3.4 CITY-ST-ZIP	
TITLE	DST	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAZNEDE, RAY	4.2 NAME	
STREET ADDRESS	12641 KELLY SANDS WY #127	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGLISH, PHILLIP	5.2 NAME	
STREET ADDRESS	12581 KELLY SANDS WY #508	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33908	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Robert Peters* ROBERT PETERS, PRES 4-20-98 (941) 466-3330

CR2E037 (10/97)