

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N24990

FILED
Apr 12, 2002 8:00 AM
Secretary of State

Entity Name: KELLY GREENS COMMUNITY ASSOCIATION I, INC.

Current Principal Place of Business:

16681 MCGREGOR BLVD
SUITE 104
FT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

16681 MCGREGOR BLVD
SUITE 104
FT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 65-0106198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLER, BEATRICE
16681 MCGREGOR BLVD
STE 104
FT MYERS, FL 33908 US

Name and Address of New Registered Agent:

TOP MANAGEMENT OF SW FL INC
16681 MCGREGOR BLVD
STE 104
FT MYERS, FL 33908 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: BEATRICE DILLER

04/12/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BATTON, DONALD
Address: 12601 KELLY SANDS WAY #408
City-St-Zip: FORT MYERS, FL 33908

Title: PD () Delete
Name: MOLYNEAUX, JAMES
Address: 12621 KELLY SANDS WAY #305
City-St-Zip: FT. MYERS, FL 33908

Title: D () Delete
Name: MATZ, MARY ELLEN
Address: 12621 KELLY SANDS WAY #225
City-St-Zip: FT. MYERS, FL 33908

Title: D () Delete
Name: SCHANTZ, PAUL
Address: 12581 KELLY SANDS WAY #503
City-St-Zip: FT MYERS, FL 33908

Title: STD (X) Delete
Name: ESTABROOK, W T
Address: 12661 KELLY SANDS WAY #104
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: SCHANTZ, PAUL
Address: 12581 KELLY SANDS WAY #503
City-St-Zip: FT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JAMES MOLYNEAUX

PD

04/12/2002

Electronic Signature of Signing Officer or Director

Date