


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 13, 2007 8:00 am**  
**Secretary of State**

05-07-2007 90061 007 \*\*\*\*61.25

**DOCUMENT # N98000001203**

1. Entity Name  
 VERANDA I AT FAIRWAY ISLE ASSOCIATION, INC.



Principal Place of Business  
 C/O SCHOOL MANAGEMENT INC  
 9411 CYPRESS LAKE DR # 2  
 FORT MYERS, FL 33919

Mailing Address  
 C/O SCHOOL MANAGEMENT INC  
 9411 CYPRESS LAKE DR # 2  
 FORT MYERS, FL 33919

66020360



2. Principal Place of Business - No P.O. Box #  
 C/O Tropical Isles Mgmt

3. Mailing Address  
 C/O Tropical Isles Mgmt

Suite, Apt. #, etc.  
 12734 Kenwood Ln. #49

Suite, Apt. #, etc.  
 12734 Kenwood Ln. #49

04192007 Chg-NP CR2E037 (12/06)

City & State  
 Ft. Myers, FL

City & State  
 Ft. Myers, FL

4. FEI Number  
 65-0825019

Applied For  
 Not Applicable

Zip  
 33907

Country  
 USA

Zip  
 33907

Country  
 USA

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

6. Name and Address of Current Registered Agent  
 CRUZ, BRYAN  
 C/O SCHOOL MANAGEMENT INC  
 9411 CYPRESS LAKE DR STE 2  
 FORT MYERS, FL 33919

7. Name and Address of New Registered Agent

Name  
 Tropical Isles Mgmt

Street Address (P.O. Box Number is Not Acceptable)  
 12734 Kenwood Lane

Suite 49

City  
 Fort Myers

State  
 FL

Zip Code  
 33907

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* *[Signature]* *4/20/07*

Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

Filing Fee is \$61.25  
 Due by May 1, 2007

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	PETERSON, JAYNE	8099 QUEEN PALM LANE #216	FORT MYERS, FL <del>33912</del> 33966	<input type="checkbox"/>
V	HAFERTEPE, MARY	8099 QUEEN PALM LANE, #212	FORT MYERS, FL <del>33912</del> 33966	<input type="checkbox"/>
ST	HOKE, BEVERLY	8083 QUEEN PALM LANE, #413	FORT MYERS, FL <del>33912</del> 33966	<input type="checkbox"/>
P	BRANTLEY, BOB	8099 QUEEN PALM LANE, #211	FORT MYERS, FL <del>33912</del> 33966	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VP	MARY ALICE WALL	8083 QUEEN PALM LANE #416	FORT MYERS FL 33966	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *[Signature]* ROBERT E. BRANTLEY, PRESIDENT 7-2-2007 (517) 332-3651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date/Time Phone #