

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000003644

**Entity Name:** KELLY GREENS GARDEN CLUB INC.

**Current Principal Place of Business:**

12300 KELLY GREENS BLVD  
FT MYERS, FL 33908

**Current Mailing Address:**

12300 KELLY GREENS BLVD  
FT MYERS, FL 33908

**FEI Number:** 65-0245760

**Certificate of Status Desired:** No

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

SCHREIER, DEBORAH  
12500 KELLY PINES COURT  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRES  
Name            SCHREIER, DEBORAH  
Address        12500 KELLY PINES COURT  
City-State-Zip: FT MYERS FL 33908

Title            V.P.  
Name            KOEPER, MARY  
Address        16350 KELLY COVE DRIVE #289  
City-State-Zip: FT MYERS FL 33908

Title            TRES  
Name            COLTURI, JANET  
Address        10 GARDEN PATH  
City-State-Zip: FARMINGTON CT 06032

Title            TRES  
Name            ROGERS, PATRICIA  
Address        12170 KELLY SANDS WAY #715  
City-State-Zip: FT MYERS FL 33908

Title            SEC  
Name            GOLDEN, LINDA  
Address        618 LEGENDS BLUFFS COURT  
City-State-Zip: EUREKA MO 66302

Title            DIR  
Name            HALLIER, MARSHA  
Address        6505 CLARET COURT  
City-State-Zip: PARKVILLE MO 64152

*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:** JANET COLTURI

**TREASURER**

**02/18/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date