

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25678

**Entity Name:** KELLY GREENS VERANDAS CONDOMINIUM II ASSOCIATION, INC.**FILED**  
**Apr 02, 2024**  
**Secretary of State**  
**3627220536CC****Current Principal Place of Business:**C/O COASTAL ASSOCIATION SERVICES, LLC.  
1314 CAPE CORAL PKWY E SUITE 205  
CAPE CORAL , FL 33904**Current Mailing Address:**C/O COASTAL ASSOCIATION SERVICES, LLC.  
1314 CAPE CORAL PKWY E SUITE 205  
CAPE CORAL , FL 33904 US**FEI Number:** 65-0083496**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COASTAL ASSOCIATION SERVICES, LLC  
C/O COASTAL ASSOCIATION SERVICES, LLC.  
1314 CAPE CORAL PKWY E SUITE 205  
CAPE CORAL , FL 33904 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:** TROY FUTCH

04/02/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	EVERS, TIM
Address	C/O COASTAL ASSOCIATION SERVICES, LLC. 1314 CAPE CORAL PKWY E SUITE 205
City-State-Zip:	CAPE CORAL FL 33904

Title	SECRETARY
Name	BOTKIN, LINDA
Address	C/O COASTAL ASSOCIATION SERVICES, LLC. 1314 CAPE CORAL PKWY E SUITE 205
City-State-Zip:	CAPE CORAL FL 33904

Title	PRESIDENT
Name	ORCUTT, RICHARD
Address	C/O COASTAL ASSOCIATION SERVICES, LLC. 1314 CAPE CORAL PKWY E SUITE 205
City-State-Zip:	CAPE CORAL FL 33904

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:** RICHARD ORCUTT**PRESIDENT**

04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date