

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 01, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90023 030 \*\*\*\*61.25

**DOCUMENT # 702305**

1. Entity Name

IONA GARDENS CIVIC ASSOCIATION, INC.



Principal Place of Business

15720 FERN DR SW  
FT MYERS FL 33908

Mailing Address

15720 FERN DR SW  
FT. MYERS FL 33908  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2222849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MC KEE, MARY E  
12081 LIVE OAK DR SW  
FORT MYERS FL 33908

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME MCKEE, MARY E  
STREET ADDRESS 12081 LIVE OAK DR SW  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☒ Delete  
NAME RHOADES, LOUISE  
STREET ADDRESS 15561 CROTON DR SW  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Change ☒ Addition  
NAME COVERDALE, CHARLES  
STREET ADDRESS 15640 FERN DR  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE T ☐ Delete  
NAME WHITEHOUSE, ADA  
STREET ADDRESS 12190 PALM DR. SW  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE RS ☒ Delete  
NAME CARARA, BEULAH S  
STREET ADDRESS 12201 CYPRESS DR  
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Change ☒ Addition  
NAME RS  
STREET ADDRESS DONNELLY, CAROL  
CITY-ST-ZIP 15650 FERN DR  
FORT MYERS FL 33908

TITLE FS ☐ Delete  
NAME REDNER, LUELLA  
STREET ADDRESS 12161 CACTUS DR SW  
CITY-ST-ZIP FT. MYERS FL 33908

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME TURNER DALE  
STREET ADDRESS 12210 CYPRESS DR SW  
CITY-ST-ZIP FT. MYERS FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Mary Ellen McKee* MARY ELLEN MCKEE 1/26/2006 239-482-4017