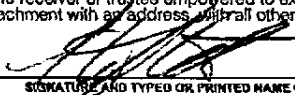


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 08:00
Secretary of State

DOCUMENT # 751307 1. Entity Name LOS CINCO (THE FIVE) CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 3831 S.E. 11TH PLACE, APT 201 CAPE CORAL, FL 33904 US		Mailing Address 3831 S.E. 11TH PLACE, APT 201 CAPE CORAL, FL 33904 US	
DO NOT WRITE IN THIS SPACE			
 01232006 No Chg-NP CR2E037 (11/05)			
4. FEI Number 65-0384439		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH, STEPHEN E 3831 S.E. 11TH PLACE, APT 201 CAPE CORAL, FL 33904		DO NOT WRITE IN THIS SPACE	
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)			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000444751 03/07/06-80015-004 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SLATTERY, KENNETH 3831 S.E. 11TH PLACE, APT 101 CAPE CORAL, FL 33904		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BETTENCOURT, MANUEL 9 MCGRAFT ROAD PELHAM, NH 03076		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SMITH, STEPHEN E 3831 S.E. 11TH PLACE, APT 201 CAPE CORAL, FL 33904		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GESELL, DOROTHY 3831 S.E. 11TH PLACE, APT 102 CAPE CORAL, FL 33904		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAO, BARBARA 27 DEER LAKE DRIVE N BABYLON, NY 11703		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
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:  Stephen E. Smith Feb 15 2006 (239) 549-6579 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **B. R. Harris** **2/21/06**