

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754073

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: GLADIOLUS GARDENS CONDOMINIUM ASSOCIATION SECTION VI, INC.

## Current Principal Place of Business:

SCHOO MGMT. INC  
9411-2 CYPRESS LAKE DR  
FORT MYERS, FL 33919 US

## New Principal Place of Business:

## Current Mailing Address:

SCHOO MGMT. INC  
9411-2 CYPRESS LAKE DR  
FORT MYERS, FL 33919 US

## New Mailing Address:

FEI Number: 59-2391872      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GELLES, BOB  
SCHOO MGMT. INC  
9411-2 CYPRESS LAKE DR  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

GELLES, ROBERT E  
SCHOO MGMT. INC  
9411-2 CYPRESS LAKE DR  
FORT MYERS, FL 33919 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: ROBERT E. GELLES

02/04/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCCASKIE, SHERMA  
Address: 9190 BUTTERFLY COURT  
City-St-Zip: FORT MYERS, FL 33919

Title: VP ( ) Delete  
Name: LIEBERWIRTH, NADIA  
Address: 13507 SIESTA PINES COURT  
City-St-Zip: FORT MYERS, FL 33919

Title: ST ( ) Delete  
Name: GRAY, ERICA  
Address: 8127 COUNTRY ROAD #204  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCCOSKIE, SHERMA  
Address: 9190 BUTTERFLY COURT  
City-St-Zip: FORT MYERS, FL 33919 US

Title: VP (X) Change ( ) Addition  
Name: LIEBERWIRTH, NADIA  
Address: 13507 SIESTA PINES COURT  
City-St-Zip: FORT MYERS, FL 33919 US

Title: S/T (X) Change ( ) Addition  
Name: FRACKENPOHL, THOMAS  
Address: 8127 COUNTRY ROAD #203  
City-St-Zip: FORT MYERS, FL 33919 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHERMA MCCOSKIE

PRES

02/04/2009

Electronic Signature of Signing Officer or Director

Date