

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90122 050 \*\*\*\*61.25

40081625



01162008 Chg-NP CR2E037 (12/06)

4. FCI Number  
88-8101085

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

ROSSMAN, CAM, MICHELLE  
ROSSMAN REALTY PROPERTY MGMT LLC  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904

## 7. Name and Address of New Registered Agent

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

**Filing Fee is \$61.25  
Due by May 1, 2008**

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

TITLE STD  
NAME LANE, RONALD ☒ Delete  
STREET ADDRESS 1028 SE 39 TERRACE # 7  
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE ☒ Delete  
NAME LUTHI, DONALD  
STREET ADDRESS 1028 SE 39TH TERR  
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE ☒ Delete  
NAME BROOKS, JAY  
STREET ADDRESS 2285 STEWART AVE #2222  
CITY-ST-ZIP SAINT PAUL, MN 55116

TITLE ☒ Delete  
NAME KELSCH, GERALD  
STREET ADDRESS 643 POND VIEW DR  
CITY-ST-ZIP MENDOTA HEIGHTS, MN 55120

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPTD ☐ Change ☒ Addition  
NAME Anna Flores  
STREET ADDRESS 3935 Country Club #17  
CITY-ST-ZIP Cape Coral, FL 33904

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

TITLE SD ☐ Change ☒ Addition  
NAME Mike Hall  
STREET ADDRESS 1425 Windsor Ct.  
CITY-ST-ZIP Cape Coral, FL 33904

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

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

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 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:

*Donald Luthi*  
by *Michelle Rossman CAM*

Donald Luthi

4/22/08

239-443-1091