

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 757495

1. Entity Name

HOLLY-LEE APTS. CONDOMINIUM ASSOCIATION, INC.



FILED
Jan 26, 2007 08:00 AM
Secretary of State

Principal Place of Business

415 10TH AVENUE SOUTH
NAPLES FL 34102

Mailing Address

415 10TH AVENUE SOUTH
APT 2
NAPLES FL 34102



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2813783

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

SAMOUCÉ, ROBERT C ESQ
2375 TAMiami TRAIL NORTH, SUITE 308
NAPLES FL 34103

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 re-registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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: DV ☐ Delete
NAME: WILSON, CHARLES
STREET ADDRESS: 415 10TH AVE. SOUTH, APT 2
CITY-STATE-ZIP: NAPLES FL 34102

TITLE: DV ☐ Delete
NAME: KLEUNER, ROY
STREET ADDRESS: 415 10TH AVE. SOUTH, APT 3
CITY-STATE-ZIP: NAPLES FL 34102

TITLE: S ☐ Delete
NAME: BEDINGHAUS, ROSEMARY
STREET ADDRESS: 415 10TH AVE. SOUTH, APT 1
CITY-STATE-ZIP: NAPLES FL 34102

TITLE: T ☐ Delete
NAME: BRONNER, PAULINE
STREET ADDRESS: 415 10TH AVE. SOUTH, APT 7
CITY-STATE-ZIP: NAPLES FL 34102

TITLE: D ☐ Delete
NAME: MYKING, STEPHEN T
STREET ADDRESS: 415 10TH AVE S #8
CITY-STATE-ZIP: NAPLES FL 34102

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition
STREET ADDRESS: 000000605269
CITY-STATE-ZIP: 01/30/07-80029-015 61.25

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY-STATE-ZIP:

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TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY-STATE-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: Stephen T Myking STEPHEN T. MYKING

1-23-2007

239-659-6513