2006 NOT-FOR-PROFIT CORPORATION

May 02, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #757597** 05-02-2006 90162 048 ****61.25 THE COURTYARDS OF CAPE CORAL SOUTH CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 40077927 1500 S.W. COUNTYARDS TERR REALTY SERVICES, INC. CAPE CORAL, FL 33914 2525 PARKWAY STREET FORT MYERS, FL 33901 IIS 2. Principal Place of Business 3. Mailing Address 9411 Cypress Lake Drive 9411 Cypress Lake Drive Suite, Apt. #, etc. Suite, Apt. #, etc. 03102006 Chq-NP CR2E037 (11/05) Suite 2 Suite 2 Applied For City & State City & State 4. FEI Number 59-2227631 Fort Myers, FL Fort Myers, FL Not Applicable ^{Zip} 33919 Country Country \$8.75 Additional 33919 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bryan Cruz C/O Schoo Managment, Inc REALTY SERVICES, INC. 2525 PARKWAY STREET Street Address (P.O. Box Number is Not Acceptable) 9411-2 Cypress Lake Drive FORT MYERS, FL 33901 33919 Fört Myers 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 e egistered agent. SIGNATURE -Signature, typed or printed name of registered agent and tipe. Facet (NOTE: Rog stored Agent a gnature required when reinstating) Filing Fee is \$61.25 Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. STD Delete TITLE . . . TITLE ☐ Change Addition Robert Guillery NAME WALTER, CHARLES NAME 5324 SW 11th Place STREET ADDRESS 1410 SW 50TH STREET #2 STREET ADDRESS Cape Coral, FL 33914 CITY-ST-782 CAPE CORAL, FL 33914 CITY-ST-7P VP Shelly Skidelsky 2225 SE 28th Terrace 33904 D TITLE X De'ete Addition TITLE ☐ Change NAME MULLEDY, PAULINE NAME STREET ADDRESS 5120 SW COURTYARD'S COURT #89 STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33914 CITY-ST-ZIP Cape Coral, FL 33904 S/T Ricarda Hyler Addition TITLE ☐ Delete TILE ☐ Change NAME SKIDELSKY, SHELLY NAME 5119 SW Courtyards Court STREET ADDRESS 2225 SE 28TH TERRACE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33904 CITY-ST-ZIP Cape Coral, FL 33914 De ete TITLE TITLE ☐ Change Addition LAUNOSKY, BEVERLY NAME NAME Olga Aguera 1416 SW COURTYARDS WAY #61 STREET ADDRESS STREET ADDRESS 1509 SW 51st Lane CAPE CORAL, FL 33914 CITY-ST-73P CITY-ST-7IP Cape Coral, Fl 33914 De ete TITLE TITLE ☐ Change ☐ Addition NAME LANDER, BONNIE NAME 1523 SW 51ST LANE #205 STREET ADDRESS STREET ADDRESS CITY-ST-78 CAPE CORAL, FL 33914 CITY - ST- ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Add Lon NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachings with all other the empowered. ROBENT GUILLERY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

(239) 5*4*2-5**4**20 Daytime Phone #

FILED