2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #759903

1. Entity Name KEN-LEE GARDENS CONDOMINIUM, INC.



Principal Place of Business Mailing Address % ASSOCIATED PROPERTY MANAGEMENT % ASSOCIATED PROPERTY MANAGEMENT 1928 LAKE WORTH RD. 1928 LAKE WORTH RD. LAKE WORTH, FL 33461 LAKE WORTH, FL 33461

FILED									
Mar 28, 2005 8:00	am								
Secretary of State									

03-28-2005 90082 014 ****61.25

SOURSTOOL

2. Principal P	ncipal Place of Business 3. Mailing Address								
Suite, Apt. #, etc. S		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-NP	CR2E037	(10/03)	
City & State		City & State	ity & State			5114		Applied For Not Applicat	
Zip	Country	Zip Co		ntry		of Status Desired		3.75 Additional	
	6. Name and Address of Current R	egistered Agent	- I			7. Name and Address of New Registered Agent			
	o. Name and Address of Current N	egistered Agent		Name					
ASSOCIATED PROPERTY MANAGEMENT									
	FED PROPERTY MANAGEMEN E WORTH RD.	IT	Street Address (ss (P.O. Box Number is Not Acceptable)			
-	RTH, FL 33461		Ī						
	,		-	City			FL	Zip Code	
6 The election				J -II:		:- sh - Cana - f [7]		-:::::b	
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	a office or reg	distered agent, or both	i, in the State of Fi	iorida. I am tar	niliar with, and acce	ρι
•									
SIGNATURE .									
0,0,0,0,0	Signature, typed or printed name of registered agent an	d title il applicable. (NOTE	: Registered	Agent signature re	quired when reinstating)		DATE		
	5W 5 1 444 55	A 511 C					daka abaak s	avabla ta	 ,
	Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Florida Department of State			
		<u></u>							
10.	OFFICERS AND DIRE	· · · · · · · · · · · · · · · · · · ·	11.	101	*	NGES TO OFFICE		CHORS IN 10 Change XAddit	
TITLE NAME	SELTZ. WILLIAM	Delete	TITLE	V	9IL, ROBER	T .			UH
STREET ADDRESS	MIKE LARUELLE 212 5TH AVE. N	l.		TADDRESS 14	128 SOUTH	MAKEMAG	= LVC, #	25	
CITY-ST-ZIP	LAKE WORTH, FL 33460		CITY-	ST-ZIP	AILE WORT	4, PL 3	3460		
TITLE	SD	Delete	TITLE	V	D			Change Addit	ion
NAME	POND, BARBARA A	• •	NAME	A	DER STEP	PHANIE	,		
STREET ADDRESS	1432 SOUTH LAKE SIDE DR. #8			T ADDRESS	126 South	LAKESIC	de DR.	#37	
CITY-ST-ZIP	LAKE WORTH, FL 33460		CITY-	ST-ZIP	DER, STEP 126 SOUTH AKE WORD	HIFL 3	33460		
TITLE	TD	Delete	TITLE	5	7)		1	🗌 Change 🛮 🙇 Addit	ion
NAME	SALISBURY, CHRISTOPHER C		NAME	13	RUNK GLO	RIAG.			
STREET ADDRESS CITY-ST-ZIP	1426 SOUTH LAKESIDE DR., #35 LAKE WORTH, FL 33460			ST-ZIP	126 SOUTH	LAKESIDE	COR. F.	38	
		<u></u>		31-211 j.d	THE WORT	H, FL 3	<u>39460</u>	7 06 FT kalab	
TITLE NAME	TD STULL, JOHN	🔼 Delete	TITLE	12.	/)		~	₫ Change ☐ Addit	on
STREET ADORESS	1430 SOUTH LAKESIDE DR., #13		1	T ADDRESS P	OND, BAR.	CHILA A.	- DA 4	L P	
CITY-ST-ZIP	LAKE WORTH, FL 33460			ST-ZIP	AKE WONT	With El	33460	0	
TITLE	VD	Delete	TITLE	173)		·)	☐ Change ☐ Addit	ion
NAME	BURKE, MICHAEL	77 22.000	NAME	1	MIKE LAI	AM	٠		
STREET ADDRESS	PO BOX 2026			T ADDRESS	MIKE LAI	RUELLE-1	1531 NO	1. K ST.	
CITY+ST-ZIP	NATCHEZ, MS 39121		CITY-	ST-ZIP	AKE WOR	M, PC	33460		
TITLE		☐ Defete	TITLE				C	Change Addit	ion
NAME			NAME						
STREET ADDRESS				T ADDRESS					

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 file empowered.

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Tras YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #