

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 08:00 AM
Secretary of State

DOCUMENT # 759903

1. Entity Name

KEN-LEE GARDENS CONDOMINIUM, INC.



Principal Place of Business

% ASSOCIATED PROPERTY MANAGEMENT
1928 LAKE WORTH RD.
LAKE WORTH FL 33461

Mailing Address

% ASSOCIATED PROPERTY MANAGEMENT
1928 LAKE WORTH RD.
LAKE WORTH FL 33461



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2125114

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ASSOCIATED PROPERTY MANAGEMENT
ASSOCIATED PROPERTY MANAGEMENT
1928 LAKE WORTH RD.
LAKE WORTH FL 33461

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, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME VAIL, ROBERT
STREET ADDRESS 1428 S LAKESIDE DR # 25
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE VD
NAME ADER, STEPHANIE
STREET ADDRESS 1426 S LAKESIDE DR # 37
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE SD
NAME BRUNK, GLORIA G
STREET ADDRESS 1426 S LAKESIDE DR # 38
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE TD
NAME POND, BARBARA A
STREET ADDRESS 1432 S LAKESIDE DR # 8
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE D
NAME SELTZ, WILLIAM
STREET ADDRESS 90 MIKE LARUELLE 1531 NO K ST
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
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 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

[Signature]

7-11-06

7-11-06

514-500-7893