

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90037 026 ****61.25

DOCUMENT # 760632

1. Entity Name
KILLIAN COMMERCIAL CONDOMINIUMS, INC.



Principal Place of Business
**1334 SO. KILLIAN DRIVE #1
LAKE PARK, FL 33403**

Mailing Address
**1334 SO. KILLIAN DRIVE #1
LAKE PARK, FL 33403**

2. Principal Place of Business

1334 So. Killian Drive
Suite, Apt. #, etc.
6

3. Mailing Address

1334 So. Killian Drive
Suite, Apt. #, etc.
6

City & State
Lake Park, Florida

Zip
33403

Country
U.S.A.

City & State
Lake Park, Florida

Zip
33403

Country
U.S.A.

03212005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2201601

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**VOSS, DAVID E
1334 SO. LILLIAN DRIVE
SUITE 1
LAKE PARK, FL 33403**

7. Name and Address of New Registered Agent

Name **William P. Smith**
Street Address (P.O. Box Number is Not Acceptable)

1334 So. Killian Drive # 6
City **Lake Park, FL** Zip Code **33403**

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 *William P. Smith*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-21-05
DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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 **PD** ☒ Delete
NAME **VOSS, DAVID E**
STREET ADDRESS **134 SO. KILLIAN DRIVE #1**
CITY-ST-ZIP **LAKE PARK, FL 33403**

TITLE **VPO** ☐ Delete
NAME **CURTIS, JOHN**
STREET ADDRESS **720 TEAL WAY**
CITY-ST-ZIP **N. PALM BEACH, FL 33408**

TITLE **PD** ☐ Delete
NAME **SMITH, WILLIAM P**
STREET ADDRESS **1334 SO. KILLIAN DRIVE #6**
CITY-ST-ZIP **LAKE PARK, FL 33403**

TITLE **Sec.** ☐ Delete
NAME **CAZA Molyneux**
STREET ADDRESS **1334 S. Killian Dr #3**
CITY-ST-ZIP **Lake Park FL 33403**

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

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

TITLE ☐ Change ☐ Addition
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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 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 like empowered.

SIGNATURE: *William P. Smith*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/05
Date

312-0090
Daytime Phone #