## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Feb 13, 2006 8:00 am **Secretary of State DOCUMENT #761435** 02-13-2006 90004 038 \*\*\*\*61.25 PALM BAY ESTATES CONDOMINIUM ASSOCIATION, INC. Mailing Address Principal Place of Business C/O WEIBEL, HENNELLS, & CARUFE PA C/O WEIBEL, HENNELLS, & CARUFE PA P.O. BOX 1658 P.O. BOX 1658 BONITA SPRINGS, FL 34133-1658 US BONITA SPRINGS, FL 34133-1658 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 59-2271164 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HENNELLS, SCOTT D. Street Address (P.O. Box Number is Not Acceptable) 9240 BONITA BEACH RD STE 3305 **BONITA SPRINGS, FL 34135** Zip Code City 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 . DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renetating) 9. Election Campaign Financing Make check payable to Filing Foo is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by Way 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change Addition TITLE ☐ Defete TITLE SMITH, GLORIA NAME NAME STREET ADDRESS STREET ADDRESS 26773 HICKORY BLVD, #4 CITY-ST-ZIP **BONITA SPRINGS, FL** CITY-53-7P VP Addition Octete TITLE Chance ROMP, ROBERT NAME NAME STREET ADDRESS 26773 HICKORY BLVD #6 STREET ADDRESS BONITA SPRINGS, FL CITY-ST-ZIP CITY-ST-7P ☐ Change Addition ☐ Delete TITLE NAME ROMP, LORETTA NAME STREET ADDRESS STREET ADDRESS 26773 HICKORY BLVD. #6 **BONITA SPRINGS, FL** CITY-ST-ZIP CITY-ST-ZIP ■ Addition ППΕ ☐ Detete TITLE BLAZER, KAREN NAME STREET ADDRESS 26773 HICKORY BLVD #8 STREET ADDRESS **BONITA SPRINGS, FL** CITY-ST-ZIP CITY-ST-ZIP ☑ Delete TITLE ☐ Chance ☐ Addition TITLE ADAMS, DENNIS NAME NAME STREET ADDRESS 26773 HICKORY BLVD #2 STREET ADDRESS BONITA SPRINGS, FL CITY-ST-ZIP CITY-ST-7IP D Delete TITLE ☐ Change ■ Addition TITLE ZELISKI, RON NUME 26773 HICKORY BLVD #5 STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filling 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 attachment with an address, with all other like empowered.

OFFICER OR DIRECTOR

CITY-ST-ZIP

Blazer,

BONITA SPRINGS, FL 34133

SIGNATURE: Your Slaver President May of Stands of

STREET ADORESS