

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90037 035 ****61.25

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01312006 Chg-NP CR2E037 (11/05)

DOCUMENT # N00000001602					
1. Entity Name KAPOK GRAND HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 26750 U.S. HWY. 19 NORTH, SUITE 301 CLEARWATER, FL 33761			Mailing Address 3001 EXECUTIVE DR STE 260 CLEARWATER, FL 33762 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3636823	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR #260 CLEARWATER, FL 33762			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SPECTOR, BERNARD		NAME		
STREET ADDRESS	11260 KAPOK GRAND CIR		STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COLUMBUS, AL		NAME		
STREET ADDRESS	11127 KAPOK GRAND CIRCLE, #306		STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		CITY-ST-ZIP		
TITLE	D-P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CUNNINGHAM, ED		NAME		
STREET ADDRESS	11252 KAPOK GRAND CIR		STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		CITY-ST-ZIP		
TITLE	DVP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MANGO, MARGARET		NAME		
STREET ADDRESS	11168 KAPOK GRAND CIR		STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BROCK, RICHARD		NAME	S-Ann Zelinsky	
STREET ADDRESS	11257 KAPOK GRAND CIR		STREET ADDRESS	11189 Kapok Grand Cir	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		CITY-ST-ZIP	Medeira Beach, FL 33708	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STRICKLAND, LEE		NAME		
STREET ADDRESS	11256 KAPOK GRAND CIR		STREET ADDRESS		
CITY-ST-ZIP	MADEIRA BEACH, FL 33708		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 attachment with an address, with all other like empowered.					
SIGNATURE: <u>Edward R. Cunha</u>		Date: <u>3/23/06</u>		Daytime Phone #: <u>394-7793</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					