

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90291 017 \*\*\*\*61.25

**DOCUMENT # N01000003566**

1. Entity Name  
**CASA MARINA III CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**4321 BAY BEACH LANE  
#654  
FORT MYERS BEACH, FL 33931 US**

Mailing Address  
**C/O INTEGRATED PROPERTY MGMT.  
3435 10TH STREET N. #201  
NAPLES, FL 34103**

40070284



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**59-3723108**

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

**MANGUM, JEFF  
4321 BAY BEACH LANE  
#654  
FORT MYERS, FL 33931**

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 reinstating)

DATE

**Filing 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 ☒ Delete  
NAME MANGUM, JEFF  
STREET ADDRESS 4321 BAY BEACH LANE #654  
CITY-ST-ZIP FORT MYERS BEACH, FL 33931

TITLE DP ☐ Change ☒ Addition  
NAME Friedel, Robert  
STREET ADDRESS 4311 Bay Beach Lane #712  
CITY-ST-ZIP Ft. Myers Beach, FL 33931

TITLE TD ☐ Delete  
NAME SHARPE, NEIL  
STREET ADDRESS 4311 BAY BEACH LANE #742  
CITY-ST-ZIP FORT MYERS BEACH, FL 33931

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

TITLE VD ☐ Delete  
NAME MARRONE, LOU  
STREET ADDRESS 4321 BAY BEACH LANE #623  
CITY-ST-ZIP FORT MYERS BEACH, FL 33931

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME Jackowski, Lorraine  
STREET ADDRESS 4311 Bay Beach Lane #732  
CITY-ST-ZIP Ft. Myers Beach, FL 33931

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME Mangum, Jeff  
STREET ADDRESS 4321 Bay Beach Lane #654  
CITY-ST-ZIP Ft. Myers Beach, FL 33931

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

April 14, 2006 4634488