2006 NOT-FOR-PROFIT CORPORATION

May 05, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # N03000008243 05-05-2006 90177 020 ****61.25 VERANDA III AT CYPRESS TRACE ASSOCIATION, INC. Principal Place of Business Mailing Address 10481 SIX MILE CYPRESS PKWY FLMYERS, FL 33912-6460 10481 SIX MILE CYPRESS PKWY FT MYERS, FL 33912-6460 2. Principal Place of Business 3. Mailing Address 02082006 Chg-NP CR2E037 (11/05) ropical Isles ropical Isles Applied For MANAGEMENT SERVICES, INC. 4. FEI Number MANAGEMENT SERVICES, INC. 55-0854194 Not Applicable 12734 Kenwood Ln., Suite 49 12734 Kenwood Ln., Suite 49 \$8.75 Additional Ft. Myers, FL 33907 Ft. Myers, FL 33907 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHIELDS, CHRISTOPHER J 1833 HENDRY ST ropical Isles Street FFMYERS, FL 33901 MANAGEMENT SERVICES, INC. 12734 Kenwood Ln., Suite 49 City Code Ft. Myers, FL 33907 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 age ne of registered agent and title if applicable 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete TITLE Addition TITLE ☐ Change SPECTOR, GAIL NAME NAME JOHN E. CAPECERS STREET ADDRESS 10481 SIX MILE CYPRESS PKWY STREET ADORESS CITY-ST-ZIP FT MYERS, FL 33912 CITY-ST-71P Delete TITLE TITLE VPN MCMURRAY, DARIN NAME NAME ROLAND GRASON 2764 CIPMEN TRACE CINCLE # 25-12 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 33912 CITY-ST-ZIP MARCE FL 34119 Delete TITLE TITLE BURNS, ALAN R FRANCIS MCTYGUE CINCLE 2760 CYPRED TRACE CINCLE MAPLES FL 34119 NAME #2514 10481 SIX MILE CYPRESS PKWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 33912 CITY-ST-ZIP ☐ Delete TITLE ☐ Channe ■ Addition ROEDDING, DON NAME NAME STREET ADDRESS 12734 KENWOOD LN. # 49 STREET ADDRESS CITY-ST-ZIF FORT MYERS, FL 33907 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITHE ☐ Change ☐ Addition NAME NAME STREET ADDRESS

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 attactment with a gaddress, with all other like empowered. changed, or on an attack nent with an address, wi

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: .

CITY-ST-ZIF

JOHN E. NATURE AND TYPED OR P ITED NAME OF SIGNING OFFICER OR DIRECTOR

CAPECESS

FILED