

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 03, 2006 8:00 am**  
**Secretary of State**

02-03-2006 90013 031 \*\*\*\*61.25

<b>DOCUMENT # N04000006942</b>			
<b>1. Entity Name</b> THE COURTYARD HOMES AT BELL TOWER PARK II CONDOMINIUM ASSOCIATION, INC.			
<b>Principal Place of Business</b> 15065 MCGREGOR BLVD., SUITE 108 FT. MYERS, FL 33908		<b>Mailing Address</b> 15065 MCGREGOR BLVD., SUITE 108 FT. MYERS, FL 33908	
<b>2. Principal Place of Business</b> 9411 Cypress Lake Dr. Suite, Apt. #, etc. 2		<b>3. Mailing Address</b> 9411 Cypress Lake Dr. Suite, Apt. #, etc. 2	
<b>City &amp; State</b> Fort Myers FL		<b>City &amp; State</b> Fort Myers FL	
<b>Zip</b> 33919 <b>Country</b> USA		<b>Zip</b> 33919 <b>Country</b> USA	
<b>6. Name and Address of Current Registered Agent</b> WINER, STEVEN I 2320 FIRST ST., SUITE 1000 FT. MYERS, FL 33901-2904		<b>7. Name and Address of New Registered Agent</b> Name: Bob Geller Street Address (P.O. Box Number is Not Acceptable): c/o Schae Management, Inc. 9411 Cypress Lake Drive #2 City: Fort Myers FL Zip Code: 33919	
<b>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.</b>			
<b>SIGNATURE</b> <u>Robert E. Geller</u> <small>Signature, typed or printed name of registered agent and date if applicable.</small>		<b>SIGNATURE</b> <u>Robert E. Geller, CA7</u> <u>1/30/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small>	
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
<b>TITLE</b> D <input checked="" type="checkbox"/> Delete <b>NAME</b> HENSLEY, ROBERT D <b>STREET ADDRESS</b> 15065 MCGREGOR BLVD., SUITE 108 <b>CITY-ST-ZIP</b> FT. MYERS, FL 33908	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> SHAW, DAVID <b>STREET ADDRESS</b> 13925 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> VREEKER, JAN <b>STREET ADDRESS</b> 15065 MCGREGOR BLVD., SUITE 108 <b>CITY-ST-ZIP</b> FT. MYERS, FL 33908	
<b>TITLE</b> D <input checked="" type="checkbox"/> Delete <b>NAME</b> CRUMBIE, JAMES H <b>STREET ADDRESS</b> 15065 MCGREGOR BLVD., SUITE 108 <b>CITY-ST-ZIP</b> FT. MYERS, FL 33908	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> KNOWLES, RAY <b>STREET ADDRESS</b> 13925 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> LILIENTHAL, ROBERT <b>STREET ADDRESS</b> 13930 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	
<b>TITLE</b> P <input type="checkbox"/> Delete <b>NAME</b> O'GROSKY, JOSEPH <b>STREET ADDRESS</b> 13924 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> TRES. <b>STREET ADDRESS</b> 13928 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> GARDLIX, HENRY <b>STREET ADDRESS</b> 13928 AVON PARK CR <b>CITY-ST-ZIP</b> FORT MYERS, FL 33912	
<b>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.</b>			
<b>SIGNATURE:</b> <u>Robert E. Geller</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
<small>Date</small>		<small>Daytime Phone #</small>	