

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012887

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** TRIESTE III AT VASARI CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SCHOO MANAGEMENT  
9411-2 CYPRESS LAKE DR  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SCHOO MANAGEMENT  
9411-2 CYPRESS LAKE DR  
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 26-1168700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERT GELLES C/O SCHOO MANAGEMENT  
9411-2 CYPRESS LAKE DR  
FT MYERS, FL 33919 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHILLER, TOBY  
Address: 5530 CLEANDER DR  
City-St-Zip: CINCINNATI, OH 45238

Title: VP  
Name: BOQVIST, LARS  
Address: 11021 CORSIA TRIESTE WAY# 201  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S/T  
Name: DUNCAN, LINDA  
Address: 11031 CORSIA TRIESTE WAY # 105  
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT E GELLES

CAM

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date