

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90818 041 \*\*\*\*61.25

<b>DOCUMENT # N25678</b> 1. Entity Name <b>KELLY GREENS VERANDAS CONDOMINIUM II ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O COASTAL ASSOCIATION MGMT. 11595 KELLY ROAD, #309 FORT MYERS, FL 33908 US</b>			Mailing Address <b>11595 KELLY ROAD, #309 FORT MYERS, FL 33908 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03122007 Chg-NP CR2E037 (12/06)	
4. FEI Number <b>65-0083496</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>O'NEILL, ARLENE 11595 KELLY ROAD STE 309 FORT MYERS, FL 33908</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> 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 reappointing) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing 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>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONNOLLY, JOHN		NAME		
STREET ADDRESS	12250 KELLY GREENS BLVD 46		STREET ADDRESS		
CITY - ST - ZIP	FORT MYERS, FL 33908		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'BRIEN, JOHN		NAME		
STREET ADDRESS	12210 KELLY GREENS BLVD #70		STREET ADDRESS		
CITY - ST - ZIP	FORT MYERS, FL 33908		CITY - ST - ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEGER, GENE		NAME	GREVEL, JERRY	
STREET ADDRESS	12210 KELLY GREENS BLVD, #60		STREET ADDRESS	12250 KELLY GREENS BLVD #49	
CITY - ST - ZIP	FT. MYERS, FL 33908		CITY - ST - ZIP	FT. MYERS, FL 33908	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MERKL, MARGARET		NAME		
STREET ADDRESS	12210 KELLY GREENS BLVD #64		STREET ADDRESS		
CITY - ST - ZIP	FT MYERS, FL 33908		CITY - ST - ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE		
NAME	SMITH, RICHARD		NAME		
STREET ADDRESS	12250 KELLY GREENS BLVD #52		STREET ADDRESS		
CITY - ST - ZIP	FORT MYERS, FL 33908		CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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.					
<b>SIGNATURE:</b>			<b>JOHN O'BRIEN</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>4/5/07</b> Daytime Phone # <b>239-466-3478</b>		