2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005
Secretary of State

DOCUMENT# N25816

Entity Name: KELLY GREENS COMMUNITY ASSOCIATION II, INC.

Current Principal Place of Business:

C/O BENSON'S, INC.
12650 WHITEHALL DR
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

C/O BENSONS INC
12650 WHITEHALL DRIVE
FT. MYERS, FL 339073619

New Mailing Address:

FEI Number: 65-0105791 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENSON, MARK R
12650 WHITEHALL DR
FORT MYERS, FL 33907 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: STD ( ) Delete
Name: RINGHOFER, ALICE
Address: 12050 KELLY GREENS BLVD #126
City-St-Zip: FORT MYERS, FL 33908

Title: PD ( ) Delete
Name: MOWBRAY, PATRICIA
Address: 12130 KELLY GREENS BLVD #94
City-St-Zip: FORT MYERS, FL 33908

Title: VSD ( ) Delete
Name: GILBERT, TERRANCE
Address: 12250 KELLY GREENS BOULEVARD #53
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SMITH, TRUDY
Address: 12250 KELLY GREENS BOULEVARD #52
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA MOWBRAY PRES 03/22/2005

Electronic Signature of Signing Officer or Director — Date