

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25816

FILED
Apr 20, 2010
Secretary of State

Entity Name: KELLY GREENS COMMUNITY ASSOCIATION II, INC.

Current Principal Place of Business:

C/O COASTAL ASSCO. MGMT
11595 KELLY RD. #309
FORT MYERS, FL 33908 US

New Principal Place of Business:

711 TARPON BAY RD
SANIBEL, FL 33957

Current Mailing Address:

C/O COASTAL ASSCO. MGMT
11595 KELLY RD. #309
FORT MYERS, FL 33908 US

New Mailing Address:

PO BOX 100
SANIBEL, FL 33957

FEI Number: 65-0105791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEILL, ARLENE
C/O COASTAL ASSCO MGMT
11595 KELLY RD. #309
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD
SANIBEL, FL 33957 US

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: STEVEN MACKESY

04/20/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD
Name: REPASS, JULIA
Address: 12050 KELLY GREENS BLVD #127
City-St-Zip: FORT MYERS, FL 33908

Title: PD
Name: SHRIVER, DALE
Address: 18130 KELLY GREENS BLVD. #100
City-St-Zip: FORT MYERS, FL 33908

Title: STD
Name: SMITH, TRUDY
Address: 12250 KELLY GREENS BOULEVARD #52
City-St-Zip: FORT MYERS, FL 33908

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: DALE SHRIVER

PD

04/20/2010

Electronic Signature of Signing Officer or Director

Date