


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90082 015 ****61.25

DOCUMENT # N30369 1. Entity Name TERRAVERDE 6 CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 15660 SAN CARLOS BLVD 40 FT MYERS, FL 33908 US		Mailing Address 15660 SAN CARLOS BLVD 40 FT MYERS, FL 33908 US	
2. Principal Place of Business - No P.O. Box # P+M Property Management Suite, Apt. #, etc. 14360 S. Tamiami Trail, #B City & State Fort Myers, FL Zip 33912 Country US		3. Mailing Address P+M Property Management Suite, Apt. #, etc. 14360 S. Tamiami Trail, #B City & State Fort Myers, FL Zip 33912 Country US	
			
		01122007 Chg-NP CR2E037 (12/06)	
4. FEI Number 65-0097100		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAPP, PAUL L C/O P & M PROPERTY MANAGEMENT 15660 SAN CARLOS BLVD, #40 FORT MYERS, FL 33908		7. Name and Address of New Registered Agent Name Paul Sapp Street Address (P.O. Box Number is Not Acceptable) C/O P+M Property Management 14360 S. Tamiami Trail, #B City Fort Myers FL Zip Code 33912	
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 fee if applicable.</small>		DATE 4-16-07 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P MORAUSKI, GERALD <input type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	MORAUSKI, GERALD	NAME	14360 S. Tamiami Trail, #B
STREET ADDRESS	15660 SAN CARLOS BLVD #40	STREET ADDRESS	Fort Myers, FL 33912
CITY - ST - ZIP	FT MYERS, FL 33908	CITY - ST - ZIP	
TITLE	V YEE, HARRY <input type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	YEE, HARRY	NAME	14360 S. Tamiami Trail, #B
STREET ADDRESS	15660 SAN CARLOS BLVD #40	STREET ADDRESS	Fort Myers, FL 33912
CITY - ST - ZIP	FT MYERS, FL 33908	CITY - ST - ZIP	
TITLE	T BECKMAN, BILL <input type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	BECKMAN, BILL	NAME	14360 S. Tamiami Trail, #B
STREET ADDRESS	15660 SAN CARLOS BLVD #40	STREET ADDRESS	Fort Myers, FL 33912
CITY - ST - ZIP	FT MYERS, FL 33908	CITY - ST - ZIP	
TITLE	S SAPP, PAUL L <input checked="" type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	SAPP, PAUL L	NAME	Randall Dineley
STREET ADDRESS	15660 SAN CARLOS BLVD #40	STREET ADDRESS	14360 S. Tamiami Trail, #B
CITY - ST - ZIP	FT MYERS, FL 33908	CITY - ST - ZIP	Fort Myers, FL 33912
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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.			
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4-16-07 (231) 486577 <small>Daytime Phone #</small>	