

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-11-2006 90109 004 ****61.25

DOCUMENT # N31705 1. Entity Name KELLY GREENS MANOR CONDOMINIUM III ASSOCIATION, INC.					
Principal Place of Business % TOP MGMT OF SW FL, INC 16681 MCGREGOR BLVD #104 FT. MYERS, FL 33908 US			Mailing Address % TOP MGMT OF SW FL, INC 16681 MCGREGOR BLVD #104 FT. MYERS, FL 33908 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0141203	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FILED TOP MGMT OF SW FL, INC. 16681 MCGREGOR BLVD #104 FT MYERS, FL 33908				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 the registered agent.				FL Zip Code	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GRADY, RAYMOND ☒ Delete 12171 KELLY SANDS WAY #1571 FORT MYERS, FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROSENBERG, JOEL ☐ Delete 12171 KELLY SANDS WAY #1578 FORT MYERS, FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO TAYLOR, WILLIAM ☒ Delete 12171 KELLY SANDS WAY #1583 FT MYERS, FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAY, DORIS ☐ Change ☒ Addition 12171 KELLY SANDS WAY #1576 FT MYERS FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AMES, MIKE ☐ Change ☒ Addition 12171 KELLY SANDS WAY #1577 FT MYERS FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OIE, ROBIN ☐ Change ☒ Addition 12171 KELLY SANDS WAY #1567 FT MYERS FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMICK, JERARD ☐ Change ☒ Addition 12171 KELLY SANDS WAY #1536 FT MYERS FL 33908				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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: <u>25 Jones Jr</u> 3-21-06 SIGNATURE AND TYPED OR PRINTED NAME OF RECORDING OFFICER OR DIRECTOR					