

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90241 026 ****61.25

DOCUMENT # N36075



1. Entity Name
LANTANA ON THE GULF CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
**C/O ISLAND REALTY & MANAGEMENT
P.O. BOX 100
SANIBEL, FL 33957**

Mailing Address
**C/O ISLAND REALTY & MANAGEMENT
P.O. BOX 100
SANIBEL, FL 33957**

2. Principal Place of Business
c/o Island Management Group
Suite, Apt. #, etc.

3. Mailing Address
c/o Island Management Group
Suite, Apt. #, etc.



02242005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0316805

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PAPPAS, CAROL
C/O ISLAND REALTY & MANAGEMENT
P O BOX 100-703 TARPON BAY RD
SANIBEL, FL 33957**

7. Name and Address of New Registered Agent

Name **Steven J. Mackesy**
Street Address (P.O. Box Number is Not Acceptable)
c/o Island Management Group
PO Box 100-711 Tarpon Bay Road
City **Sanibel** FL Zip Code **33957**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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 **VTD** ☐ Delete
NAME **HEDDEN, JEFF**
STREET ADDRESS **1279 JOHNSON FERRY RD 200**
CITY-ST-ZIP **MARIETTA, GA 30068**

TITLE **PD** ☒ Delete
NAME **BOWDEN, ROBERT**
STREET ADDRESS **850 WHITE CIRCLE CT NW**
CITY-ST-ZIP **MARIETTA, GA 30060**

TITLE **SD** ☐ Delete
NAME **RIGHTMIRE, ROBERT**
STREET ADDRESS **8071 LONG FOREST DRIVE**
CITY-ST-ZIP **BRECKSVILLE, OH 44141**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Change ☒ Addition
NAME **Allen Oster**
STREET ADDRESS **2323 W Gulf Drive 302**
CITY-ST-ZIP **Sanibel FL 33957**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Robert A. Rightmire
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-05
Date

440-746-1156
Daytime Phone #