

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90291 003 ****61.25

DOCUMENT # N40366

1. Entity Name
ST. KITTS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
6585 NICHOLAS BLVD.
NAPLES, FL 34108 US

Mailing Address
6585 NICHOLAS BLVD.
NAPLES, FL 34108 US

60043040



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0222727

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

7. Name and Address of New Registered Agent

~~LESNOSKI JR, LEONARD~~
~~6585 NICHOLAS BLVD.~~
~~NAPLES, FL 34108~~

Name **DANIEL STAUPE**

Street Address (P.O. Box Number is Not Acceptable)

6585 NICHOLAS BLVD

City **NAPLES**

FL

Zip Code **34108**

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

Daniel P. Staupe

Daniel P. Staupe

4/7/06

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, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME PEABODY, CHRISTOHER
STREET ADDRESS 6585 NICHOLAS BLVD, #805
CITY-ST-ZIP NAPLES, FL 34108

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

TITLE VD ☐ Delete
NAME SLOAN, MICHAEL
STREET ADDRESS 6589 NICHOLAS BLVD, # 1905
CITY-ST-ZIP NAPLES, FL 34108

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

TITLE ☒ Delete
NAME KRUCHTEN, CLAIRE
STREET ADDRESS 6585 NICHOLAS BLVD. #901
CITY-ST-ZIP NAPLES, FL 34108

TITLE ☐ Change ☒ Addition
NAME **SD Eric Brown**
STREET ADDRESS **6585 Nicholas Blvd. #1702**
CITY-ST-ZIP **Naples, FL 34108**

TITLE TD ☐ Delete
NAME RAINEY, JENNIFER
STREET ADDRESS 6585 NICHOLAS BLVD. #204
CITY-ST-ZIP NAPLES, FL 34188

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

TITLE VD ☐ Delete
NAME TEMPLE, DONALD
STREET ADDRESS 6585 NICHOLAS BLVD, #1401
CITY-ST-ZIP NAPLES, FL 34108

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

TITLE ☐ Delete
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 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:

Jennifer Ann Rainey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #