

FILE NOW: FILING FEE IS \$61.25

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90003 041 ****61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000905

1. Corporation Name

KELL ESTATES HOMEOWNERS ASSOCIATION, INC.

n/c 4/26/99

Principal Place of Business

P O BOX 82025
TAMPA, FL 33682 US

Mailing Address

c/o THE KEY BANK OF FLORIDA
P.O. DRAWER 151317
TAMPA, FL 33684-1317

2. Principal Place of Business

21 P O BOX 82025

22 Suite, Apt. #, etc.

23 City & State
TAMPA, FL

24 Zip 33682 Country US

2a. Mailing Address

26 P O BOX 82025

27 Suite, Apt. #, etc.

28 City & State
TAMPA, FL

29 Zip 33682 Country US

3. Date Incorporated or Qualified

02/22/1993

4. FEI Number

59-3319318

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SPEAR, JO C ESQUIRE
877 EXECUTIVE CENTER DR W
GLADES BUILDING, SUITE 303
ST. PETERSBURG, FL 33702 US

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CALDWELL, ROBERT W III
STREET ADDRESS 1635 B ROYAL PALM DRIVE
CITY-ST-ZIP GULFPORT, FL 33707

TITLE ☐ DELETE

NAME KEARNEY, RAYMOND J JR
STREET ADDRESS 1536 WATERWOOD DRIVE
CITY-ST-ZIP LUTZ, FL 33549

TITLE ☒ DELETE

NAME STANTON, WILLIAM V
STREET ADDRESS 3601 W. WATERS AVENUE
CITY-ST-ZIP TAMPA, FL 33614

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME CALDWELL, ROBERT W III
1.3 STREET ADDRESS P O BOX 1971
1.4 CITY-ST-ZIP BOCA GRANDE, FL 33921

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Raymond J. Kearney
Raymond J. Kearney, Jr. Vice President

April 14, 1999

813-948-1493

Date

Daytime Phone #