## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 09, 2007 8:00 am Secretary of State DOCUMENT # N98000004644 04-09-2007 90049 012 \*\*\*\*61.25 EVEREST HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address C/O KURT A. GEARING C/O KURT A. GEARING 2033 SE 27TH TERRACE 2033 SE 27TH TERRACE CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04032007 CR2E037 (12/06) City & State City & State Applied For 4. FEI Number 65-0871174 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GEARING, KURT Street Address (P.O. Box Number is Not Acceptable) 2033 SE 27TH TERRACE CAPE CORAL, FL 33904 City Zip Code 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 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11, DS TITLE ☐ Change Addition TITLE Delete FRANCES CERNUSICA GEARING, HELEN NAME NAME 1801 EVEREST PARKWAY STREET ADDRESS 2033 SE 27TTH TERRACE STREET ADDRESS 339 04 CITY-ST-ZIP CAPE CORAL, FL 33904 CITY-ST-ZIP CAPE CORAL, FL ΠP Addition ☐ Delete TITLE ☐ Change TITLE GEARING KURT NAME NAME STREET ADDRESS 2033 SE 27TH TERRACE STREET ADORESS CAPE CORAL, FL 33904 CITY-ST-ZIP CITY-ST-ZIP DVP Change ☐ Addition TITLE ☐ Delete TITL F BARTH, JOHN NAME NAME 2255 EVÉREST PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL, FL 33904 OT ☐ Change **Addition** ÐΤ 🔀 Delete TITTE THLE JERRY MILLER KEEN, GLORIA NAME 2134 EVEREST PARKWAY STREET ADDRESS **2658 SE 19TH AVENUE** STREET ADDRESS CAPE CORAL, FL 33904 CITY-ST-ZIP CITY-ST-7IP CAPE CORAL, FL 33904 ☐ Addition TITLE ☐ Change TILE ☐ Delete 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.

TRIE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

SIGNATURE:

TITLE

NAME STREET ADDRESS

> em NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MILLAR, TREASURER

239.574.25/1

Change

■ Addition

**FILED**