2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006
Secretary of State

DOCUMENT# 713826

Entity Name: THREE SEASONS ASSOCIATION NO. 2, INC.

Current Principal Place of Business:

16400 NORTHEAST 17 AVENUE
BUILDING # 2
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

16400 NORTHEAST 17 AVENUE
BUILDING #2
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 59-1265698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EUSEBIO, GIL
16400 NE 17TH AVENUE
APT. # 607
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	EUSEBIO, GIL	
Address:	16400 N.E. 17 AVENUE, #607	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	V	( ) Delete
Name:	SINGER, JAY	
Address:	16400 NE 17TH AVE., APT 604	
City-St-Zip:	N MIAMI BEACH, FL 33162	
Title:	ST	( ) Delete
Name:	CASTRO, SARA	
Address:	16400 NE 17TH AVE., APT 706	
City-St-Zip:	N MIAMI BEACH, FL 33162	
Title:	T	( ) Delete
Name:	EUSEBIO, MARIA	
Address:	16400 NE 17TH AVENUE, #605	
City-St-Zip:	N MIAMI BEACH, FL 33162	
Title:	D	( ) Delete
Name:	LESLIE, SWORTZ	
Address:	16400 NE 17TH AVENUE, #702	
City-St-Zip:	N MIAMI BEACH, FL 33162	
Title:	D	( ) Delete
Name:	TRUDY, FREY	
Address:	16400 N.E. 17TH AVE., #505	
City-St-Zip:	N MIAMI BEACH, FL 33162	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GIL EUSEBIO P 03/24/2006

Electronic Signature of Signing Officer or Director — Date