FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2001 8:00 am [§] Secretary of State **DOCUMENT # 751203** 1. Entity Name CORAL GARDENS II CONDOMINIUM ASSOCIATION, INC. 04-11-2001 90031 037 ****61.25 Mailing Address Principal Place of Business 2820 RIVERSIDER DRIVE #208 2820 RIVERSIDER DRIVE #208 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2096569 Not Applicable \$8.75 Additional 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 Name. -Street Address (P.O. Box Number is Not Acceptable) SULLIVAN, KAREN M ESQ 100 W. CYPRESS CREEK RD., STE 910 FT. LAUDERDALE FL 33309 Zip Code City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE ☐ Delete TITLE DAWSON, WILLIAM NAME NAME 2810 RIVERSIDE #105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORAL SPRINGS FL 33065** CITY-ST-ZIP VD ☐ Change ☐ Addition Delete TITLE TITLE FISHER, NANCY NAME NAME 2830 RIVERSIDE DRIVE #101 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** CITY-ST-ZIP CITY-ST-ZIP SECRETARY Change Addition Delete TITLE SARA MAYORGA 2705 NW 83 TERRACE TITLE WINTERSTEIN, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 2820 RIVERSIDE DRIVE #201 CORALSPES. FL 33065 CITY-ST-7IB CITY-ST-ZIP **CORAL SPRINGS FL 33065** ☐ Addition Change ☐ Delete TITLE TITLE WAGENER, FLORENCE NAME NAME 2820 RIVERSIDE DRIVE #204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL 33065** Change ☐ Addition TITLE ☐ Delete SHILLING, PAULINE NAME NAME 2830 RIVERSIDE DRIVE #104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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.

BED FLORENCE M. WAGENER 954-755-9065