

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 11, 2008
Secretary of State**

DOCUMENT# N04000001056

Entity Name: VERANDA II AT LAKE HART ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 51-0497632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD () Delete
Name: NEISWENDER, LARRY
Address: 9422 MYRTLE CREEK LN #808
City-St-Zip: ORLANDO, FL 32832

Title: VPD () Delete
Name: RAMOS, JOSE
Address: 9435 MYRTLE CREEK LN #306
City-St-Zip: ORLANDO, FL 32832

Title: SD () Delete
Name: OLSEN, RODNEY
Address: 9429 MYRTLE CREEK LN #406
City-St-Zip: ORLANDO, FL 32832

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORANO, CHRISTINE
Address: 9422 MYRTLE CREEK LN #805
City-St-Zip: ORLANDO, FL 32832

Title: VPD (X) Change () Addition
Name: ADAMS, DEAN
Address: 9435 MYRTLE CREEK LN #309
City-St-Zip: ORLANDO, FL 32832

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

I hereby certify that the information supplied with this filing does not qualify 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: CHRISTINE MORANO

PD

04/11/2008

Electronic Signature of Signing Officer or Director

_____ Date