2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004143

FILED Mar 09, 2005 Secretary of State

Entity Name: CROWN GATE VILLAS II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

14160 PALMETTO FRONTAGE ROAD 7750 WEST 26TH AVE

SUITE 21 SUITE 4

MIAMI, FL 33016 HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

14160 PALMETTO FRONTAGE ROAD P.O. BOX 160718 SUITE 21 P.O. BOX 160718 HIALEAH, FL 33016

MIAMI, FL 33016

FEI Number: 56-2464153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAGOMACINI, JEFFREY FLORIDA'S PROPERTY MANAGEMENT GROUP

14160 PALMETTO FRONTAGE ROAD

SUITE 21

MIAMI, FL 33016 US

TECHNOXO THOSE INTERPRETATION TO SUITE 4

HIALEAH, FL 33016 US

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.

in the State of Florida.

SIGNATURE: ORLANDO FERRO 03/09/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name: LAGOMACINI, JEFFREY Name: NUNEZ, JUAN E

Address: 14160 PALMETTO FRONTAGE ROAD SUITE 21 Address: P.O. BOX 160718

City-St-Zip: MIAMI, FL 33016 City-St-Zip: HIALEAH, FL 33016

Title: SD () Delete Title: SD (X) Change () Addition Name: VEGA, ALEXANDER Name: RODRIGUEZ, LUIS D

 Address:
 14160 PALMETTO FRONTAGE ROAD SUITE 21
 Address:
 P.O. BOX 160718

 City-St-Zip:
 MIAMI, FL 33016
 City-St-Zip:
 HIALEAH, FL 33016

 $\label{eq:title: VD () Delete Title: VD (X) Change () Addition} \end{minipage}$

 Name:
 RODRIGUEZ, OTTO
 Name:
 CRUZ, MARIO

 Address:
 14160 PALMETTO FRONTAGE ROAD SUITE 21
 Address:
 P.O. BOX 160718

 City-St-Zip:
 MIAMI, FL 33016
 City-St-Zip:
 HIALEAH, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUAN E NUNEZ PD 03/09/2005