

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 19, 2007  
Secretary of State**

DOCUMENT# N06000006524

Entity Name: LUXURY CONDOMINIUMS AT FISHHAWK RANCH 2, INC.

**Current Principal Place of Business:**

8804 SHALLOW CREEK LN  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

8804 SHALLOW CREEK LN  
RIVERVIEW, FL 33569

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

JAMES, JUDITH L  
325 S BOULEVARD  
TAMPA, FL 33606    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:                      HOLLMAN, KENT  
Address:                      8804 SHALLOW CREEK LN  
City-St-Zip:                      RIVERVIEW, FL 33569

Title:                      VPD                      ( ) Delete  
Name:                      REVOY, ROB  
Address:                      8804 SHALLOW CREEK LN  
City-St-Zip:                      RIVERVIEW, FL 33569

Title:                      STD                      ( ) Delete  
Name:                      SUMMERS, JEFF  
Address:                      8804 SHALLOW CREEK LN  
City-St-Zip:                      RIVERVIEW, FL 33569

**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:

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: KENT HOLLMAN

PD

03/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date