

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 12, 2008
Secretary of State

DOCUMENT# N06000008984

Entity Name: LIGHTHOUSE KEY RESORT & SPA CONDOMINIUM II ASSOCIATION, INC.

Current Principal Place of Business:

2379 BEVILLE ROAD
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

2379 BEVILLE ROAD
DAYTONA BEACH, FL 32119

New Mailing Address:

FEI Number: 26-0549784 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAGAN, J, ANDREW
2379 BEVILLE ROAD
DAYTONA BEACH, FL 32119 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: O'SULLIVAN, CHARLES
Address: 2379 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32119

Title: S () Delete
Name: MAYS, KEVIN
Address: 2379 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32119

Title: T () Delete
Name: BISHOP, WILLIAM
Address: 2379 BEVILLE ROAD
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: O'SULLIVAN, CHARLES
Address: 3400 W. OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34741

Title: VP (X) Change () Addition
Name: MAYS, KEVIN
Address: 3400 W. OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34741

Title: ST (X) Change () Addition
Name: OSBORN, MICHAEL J
Address: 3400 W. OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34741

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: KEVIN MAYS

_____ Electronic Signature of Signing Officer or Director

VP

08/12/2008

_____ Date