

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 07, 2009  
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: 3400 W. OSCEOLA PARKWAY  
City-St-Zip: KISSIMMEE, FL 34741

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

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

**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 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: CHARLES O'SULLIVAN

P

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date