2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18466

FILED Apr 02, 2012 Secretary of State

Entity Name: OAK KNOLL II AT PINE ISLAND RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

APOGEE ASSOCIAITON SERVICES INC 3600 S. CONGRESS AVE SUITE K BOYNTON BEACH, FL 33426

MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY

SUNRISE, FL 33323

Current Mailing Address:

New Mailing Address:

APOGEE ASSOCIAITON SERVICES INC 3600 S. CONGRESS AVE SUITE K BOYNTON BEACH, FL 33426 MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY

SUNRISE, FL 33323

FEI Number: 65-0039075

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

APOGEE ASSOCIATION SERVICES 3600 S. CONGRESS AVE. SUITE K BOYNTON BEACH,, FL 33426 US MIAMI MANAGEMENT 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323 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.

SIGNATURE: MEGAN LINGERFELT

04/02/2012

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

Γitle: I

Name: POLINO, TONY

Address: 1145 SAWGRASS CORPORATE PARKWAY

City-St-Zip: SUNRISE, FL 33323

Title: S/TR

Name: SILVERMAN, PAMELA

Address: 1145 SAWGRASS CORP PKWY

City-St-Zip: SUNRISE, FL 33323

Title: VP

Name: O'CONNOR, BRIAN

Address: 1145 SAWGRASS CORPORATE PKWY

City-St-Zip: SUNRISE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: MEGAN LINGERFELT

CAM

04/02/2012