2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2005 8:00 am
Secretary of State
05-26-2005 90026 042 ****61.25

DOCUMENT # N97000000381

1. Entity Name
HUNTINGTON LAKES TWO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P & M Property Management 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908	P & M Property Management 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908

05162005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0746144 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FALK, STEVEN M 850 PARK SHORE DR 3RD FLOOR NAPLES, FL 34103	Name: Paul Sapp Street Address (P.O. Box Number is Not Acceptable): P & M Property Management, 15660 San Carlos Blvd. #40 City: Fort Myers, Fl. 33908 FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Paul L Sapp 5-16-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

Filing Fee is $61.25 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JORDAN, ROSE M 2500 ASPENCREEK LANE #101 NAPLES, FL 34119	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV MOSER, LONA 6550 HUNTINGTON LAKES CIRCLE #203 NAPLES, FL 34119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST GARWOOD, NANCY 2453 MILLCREEK LANE #201 NAPLES, FL 34119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Garwood, Nancy 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Eckstein, Don 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Tamburro, Marie 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Scalise, Frank 15660 San Carlos Blvd. #40 Fort Myers, Fl. 33908	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul L Sapp 5/16/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

RECEIVED
MAY 19 2005
REVENUE