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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000004478 (0)

1. Corporation Name

REGENCY II OFFICE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2725 N. HWY. A1A, UNIT 203
INDIALANTIC FL 32903

2725 N. HWY. A1A, UNIT 203
INDIALANTIC FL 32903

3. Date Incorporated or Qualified

08/06/1997

4. FEI Number

59-3508536

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 3200 N. Wickham

26 P.O. Box 33503

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

Yes No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.

Yes No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Melbourne FL

28 Indialantic FL

Zip

Country

Zip

Country

24 32935

25 Brevard

29 32903

30 Brevard

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAKER, JAMES L
2725 N. HWY. A1A, UNIT 203
INDIALANTIC FL 32903

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

James L Baker JAMES L BAKER - PRESIDENT MARCH 9, 1998

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP DELETE
NAME BAKER, JAMES L
STREET ADDRESS 2725 N. HWY. A1A, UNIT 203
CITY-ST-ZIP INDIALANTIC FL 32903

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DT DELETE
NAME JACOBS, JOANN B
STREET ADDRESS 410 THRUSH DR.
CITY-ST-ZIP SATELLITE BEACH FL 32937

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DS DELETE
NAME WALTERS, WAYNE
STREET ADDRESS 3200 N. WICKHAM ROAD #2
CITY-ST-ZIP MELBOURNE FL 32935

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James L Baker* JAMES L BAKER MAR 9, 1998 (407) 779-3010

CFR2037 (1097)