

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047816

FILED
Apr 30, 2008
Secretary of State

Entity Name: NARRAGANSETT REALTY II, INC.

Current Principal Place of Business:

C/O WALTERS/GOTTLIEB PARTNERS, INC
STE 221E
WEST PALM BEACH, FL 33401

New Principal Place of Business:

C/O WALTERS/GOTTLIEB PARTNERS, INC
250 AUSTRALIAN AVE. SOUTH STE 1100
WEST PALM BEACH, FL 33401

Current Mailing Address:

C/O WALTERS/GOTTLIEB PARTNERS, INC
STE 221E
WEST PALM BEACH, FL 33401

New Mailing Address:

C/O WALTERS/GOTTLIEB PARTNERS, INC
250 AUSTRALIAN AVE. SOUTH STE 1100
WEST PALM BEACH, FL 33401

FEI Number: 65-0679139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOPKO, JAMES
853 SW MONTEREY COMMONS BLVD
STUART, FL 34996 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COSTELLO, JOHN F
Address: 7004 SE GOLFHOUSE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN F. COSTELLO

D

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date