## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N0000007986

1. Entity Name

SIGNATURE:

SONOMA II HOMEOWNERS ASSOCIATION, INC.



## FILED Feb 03, 2003 8:00 am Secretary of State

02-03-2003 90289 039 \*\*\*\*61.25

SCHACK, MICHAEL 4788 W. COMMERCIAL BLVD.  TITLE D DELFINO, ALEJANDRO 4788 W. COMMERCIAL BLVD.  TITLE NAME ATRIANCE FL 33319  T					O WE !	1			
TAMARAC Ft. 33319  2. Principal Place of Business  Suite, Apt. # ofc.   Gily & Sistes  City & Si	Principal Plac	ce of Business	Mailing Address		•				
Sure, Apt. #, etc.   CHECK HERE II* MAKING CHANGES  City & State  S. Certificate of Status Desired   Status Desir				VD.					
Suite, Apt. #, etc.  City & State  City & St							)		
City & State  Country	2. Principal F	Place of Business	3. Mailing Address						
SCHACK, EDWARD J STORY TO BE BLYD.  SCHACK, EDWARD J TOSE PINES BLYD.  STORY PINES BLYD.	Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
SCHACK, EDWARD J 7964 PINES BLVD. PEMBROKE PINES R. 30024  City  FL  20 County  Street: Address of New Registered Agent  7. Name and Address of New Registered Agent  SCHACK, EDWARD J 7964 PINES BLVD. PEMBROKE PINES R. 30024  City  FL  20 Code  This above named critity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and acceptable in cooling of the college of the state of the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and acceptable in cooling of the college of the state of the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and acceptable to provide a state of the state of Florida of Florida. I am familiar with, and acceptable to Florida Department of State  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS IN 10  Int.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Int.  BUT.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  O	City & Stat	te	City & State			4. FEI Number 65	-1088187		
SCHACK, EDWARD J 7954 PINES BLVD. PEMBROKE PINES FL 33024  Stree: Address (P.O. Box Number is Not Acceptable)  Stree: Address (P.O. Box Number is Not Acceptable)  Stree: Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  8. The above remed 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 acce fine dolligations of registered agent.  SIGNATURE  Signature, typed or private intend of registered agent and site if application.  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  OFFICERS AND DIRECTORS IN 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  SCHACK, MICHAEL 478 W. COMMERCIAL BLVD. Trust Funds  Trust Funds  STRET ADDRESS  17.5-5-29  TAMARAC FL 33319  DEFINO, ALELANDRO TAMARAC FL 33319  DEFECT CARLOS  TAMARAC FL 33319  Defect  THE MAKE  MAKE MAKE MAKE MAKE MAKE MAKE MA	Zip	Country	Zip	Cou	untry	5. Certificate of Sta	tus Desired	\$8.75 /	Additional
SCHACK, EDWARD J 7954 PINES BLVD. PEMBROKE PINES R. 33024  City  FL  Zip Code  Florida Department of State  Florida D		6. Name and Address of Current	Registered Agent	i		7. Name and Addr	ess of New Register		
PEMBROKE PINES FL 33024  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or born, in the State of Florida. I am familiar with, and accent neobligations of registered agent.  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing S5,00 May Be Added to Fees  Trust Fund Contribution.   \$5,00 May Be Added to Fees   Make Check Payable to Florida Department of State    Trust Fund Contribution.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   11.  TAMARAC FL 33319  Trust Fund S1.  Trust Fund S1.			رد مود در میانیست		Name				
PEMBROKE PINES FL 33024  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 accerne obligators of registered agent.  SIGNATURE    Signature, hybrid or private name of registered agent and to a suprissible.   I/NOTE Angulated Agent signature required when recession;   DAIT    FILE NOW: FEE IS \$61.25   S. Election Campaign Financing   \$5.00 May Be Added to Fees   Add				Street Address (P.O. Box Numbr			ot Acceptable)	• • • • • • • • • • • • • • • • • • • •	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelerate obligations of registered agent.    Signature   Signat									
8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Pforida. I am familiar with, and accelled the obligations of registered agent.  SIGNATURE    SIGNATURE   Granum hade or present name of registered agent and till of applicable.   PATE Registered Agent signature required when rendating)   DATE	PEMBRO	KE PINES FL 33024							
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