

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724524

Entity Name: HABITAT II CONDOMINIUM, INC.**Current Principal Place of Business:**820 SOUTH STATER ROAD 7
PLANTATION, FL 33317**Current Mailing Address:**820 SOUTH STATE ROAD 7
PLANTATION, FL 33317 US**FEI Number:** 59-1504769**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KATZMAN CHANDLER
5297 W. COPANS RD.
MARGATE, FL 33063 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:** LEIGH KATZMAN

02/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FERNANDEZ, ROY
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title PRESIDENT
Name RAMJEET, RAJENDRA
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title DIRECTOR
Name WEBB, OWEN
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title TREASURER
Name PINDELL, WAYNE D
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title SECRETARY
Name FERNANDEZ, ZENaida
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title VP
Name JONES, JAMES
Address 820 SOUTH STATE ROAD 7
City-State-Zip: PLANTATION FL 33317

Title DIRECTOR
Name TRUE, NOEL
Address 820 SOUTH STATER ROAD 7
City-State-Zip: PLANTATION FL 33317

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: RAJENDRA RAMJEET

PRESIDNET

02/15/2017

Electronic Signature of Signing Officer/Director Detail

Date