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: PAUL RUFO

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/18/2019

04/18/2019

Date

	o o o		
Officer/Dire	ctor Detail :		
Title	PRESIDENT	Title	VP
Name	RUFO, PAUL	Name	GUPTA, DR.
Address	7145 TURNER ROAD SUITE 101	Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955	City-State-Zip:	ROCKLEDGE FL 32955
Title	SEC/TREAS		
Name	SEAQUIST, LAURIE		
Address	7145 TURNER ROAD		

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.

Name and Address of Current Registered Agent:

OMEGA COMMUNITY MANAGEMENT, INC. 7145 TURNER ROAD SUITE 101 ROCKLEDGE, FL 32955 US

SIGNATURE: DAVID HOFFMAN

SUITE 101 City-State-Zip: ROCKLEDGE FL 32955

Electronic Signature of Registered Agent

FEI Number: 59-3502536

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004478

Entity Name: REGENCY II OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7145 TURNER ROAD SUITE 101 ROCKLEDGE, FL 32955

Current Mailing Address:

7145 TURNER ROAD SUITE 101 ROCKLEDGE, FL 32955 US

Certificate of Status Desired: No

FILED Apr 18, 2019 Secretary of State 5318415977CC

Date