

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90302 027 ****61.25

DOCUMENT # 707909 1. Entity Name DREW GARDEN APARTMENTS UNIT II INC					
Principal Place of Business 4175 EAST BAY DR., SUITE 205 %COMMUNITY MANAGEMENT CONCEPTS CLEARWATER, FL 33764 US			Mailing Address 4175 EAST BAY DR., SUITE 205 %COMMUNITY MANAGEMENT CONCEPTS CLEARWATER, FL 33764 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03232005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-1578615	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BITTAKER, THOMAS 1329 DREW ST CLEARWATER, FL 34615				Name Community Management Concepts Street Address (P.O. Box Number is Not Acceptable) 4175 East Bay Dr. # 205 Clearwater City FL Zip Code 33764	
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 accept the obligations of registered agent.					
SIGNATURE <i>[Signature]</i> UP: <i>Kathy W. Brandt</i> DATE <i>4/14/05</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating).					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BITTAKER, TOM 1329 DREW ST #7 CLEARWATER, FL 33765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. TAD BARNAS ☐ Change ☐ Addition 1329 Drew St.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ROSS, PAULA 1329 DREW ST #12 CLEARWATER, FL 33765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UP/Treas/D Eileen BRYAN ☐ Change ☐ Addition 1329 Drew St Clearwater, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TATARCZVCH, ALEKSANDRA 1329 DREW ST #8 CLEARWATER, FL 33765 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec/Dir Same ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> TAD BARNAS DATE <i>4/14/05</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					