2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #713919** 04-27-2006 90216 007 ****61.25 SORRENTO VILLAS, SECTION 2 ASSOCIATION, INC. Principal Place of Business Mailing Address 204 VILLA DRIVE % SIEM 204 VILLA DRIVE % SIEM OSPREY, FL 34229-9169 OSPREY, FL 34229-9169 2. Principal Place of Business, 274 Peekskill 3. Mailing Address . 274 Peekskill Suite, Apt. #, etc Suite, Apt. #, etc. 01182006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number 59-1663031 Applied For PotnamValley lalley utnam Not Applicable Country U.S \$8.75 Additional 5. Certificate of Status Desired П 05 105 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent illiam_ Locher SIEM, LELE 204 VILLA DRIVE Street Address (P.O. Box Number is Not Acceptable) OSPREY, FL 34229-9169 Zip Code 34-22 USPREY 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. 4/10/2006 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2008 Added to Fees Fiorida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE Change Addition Delete Delete Ron Milton Way ACE, THOMAS NAME NAME 202 VILLA DR. STREET ADDRESS STREET ADORESS WINTOF, MA 02152 OSPREY, FL 34229 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE John Gafkowski 80 274 Peckskill Hollow Rd TITLE SIEM, RICHARD NAME NAME STREET ADDRESS 204 VILLA DRIVE STREET ADDRESS otnam Valley. NY 10579 CITY-ST-7IP **OSPREY, FL 34229** CITY-ST-7P Delete Change TILE TITLE Pauline Gafkowski 14 Peekskill Hollow NAME SIEM, LELE NAME 204 VILLA DRIVE STREET ADDRESS STREET ADDRESS 10579 **OSPREY, FL 34229** CITY-ST-7/P CITY-ST-ZIP iram Va 🛛 Delete Change TITLE TITLE Addition William Lo Locher PAITISON, MARY JO NAME NAME 248 MIAMI AVENUE STREET ADDRESS STREET ADDRESS Osprey, OSPREY, FL 34229 CITY-ST-ZIP CITY-ST-ZIP Sherman Box 68 Delete TITLE TITLE Change ☐ Addition **DUDENHOEFFER, JOLIE** NAME NAME 207 TINA ISLAND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OSPREY, FL 34229 CITY-ST-7IP Delete TITLE TITLE homas 243 30 DUDENHOSFFER, JULIE NAME NAME 6243 207 TINA ISLAND DRIVE STREET ADDRESS CITY-ST-ZIP OSPREY, FL 34229 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. STREET ADDRESS

SIGNATURE: Jauline Stations PAWINE GAF KOWSK! TREAS. 4/24/06 845-526-292

FILED

Apr 27, 2006 8:00 am