

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 23, 2007
Secretary of State

DOCUMENT# 717039

Entity Name: LAUDERDALE OAKS CONDOMINIUM II, INC.**Current Principal Place of Business:**3071 NW 47 TERRACE
LAUDERDALE LAKES, FL 33313**New Principal Place of Business:****Current Mailing Address:**C/O CASTLE MANAGEMENT INC
PO BOX 559009
FORT LAUDERDALE, FL 333559009**New Mailing Address:**4800 N. STATE ROAD 7
105
LAUDERDALE LAKES, FL 33319**FEI Number:** 59-1353511**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GLICKMAN, LARRY Z ESQ
SACHS, SAX, KLEIN
301 YAMATO RD, STE 4150
BOCA RATON, FL 33431 US**Name and Address of New Registered Agent:**TACHER, FRANKLIN
4800 N. STATE ROAD 7
105
LAUDERDALE LAKES, FL 33319 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: FRANKLIN J. TACHER

07/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: KALKANAJIAN, BARBARA
Address: 3071 NW 47TH TERRACE #224
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: PD () Delete
Name: MACCHIONE, JANE
Address: 3071 NW 47 TERRACE #227
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: TD () Delete
Name: O'REILLY, JAMES
Address: 3071 NW 47 TERRACE #229
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: S () Delete
Name: REPUCCI, THERESA
Address: 3071 NW 47 TERRACE #218
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: SD () Delete
Name: LAPOINTE, JANINE
Address: 3081 NW 47 TERRACE #319
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: D () Delete
Name: TOPPI, ANTIONETTE
Address: 3081 NW 47TH TERR #306
City-St-Zip: LAUDERDALE LAKES, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JANE MACCHIONE

PRES

07/23/2007

Electronic Signature of Signing Officer or Director

Date