

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722437

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** OLD PORT COVE CONDOMINIUM ASSOCIATION TWO, INC.

**Current Principal Place of Business:**

122 LAKESHORE DR  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

C/O COMPLETE PROPERTY MGMT  
3307 NORTHLAKE BLVD., SUITE 107  
PALM BEACH GARDENS, FL 33403

**New Mailing Address:**

**FEI Number:** 59-1536200      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CROSSEN, JOSEPH F  
COMPLETE PROPERTY MGMT INC  
3307 NORTHLAKE BLVD STE 107  
PALM BEACH GARDENS, FL 33403 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: BONOMO, KIM  
Address: 134 LAKESHORE DRIVE, # 516  
City-St-Zip: N PALM BEACH, FL 33408

Title: D  
Name: YETIKYEL, FAY  
Address: 134 LAKESHORE DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PD  
Name: WITKIN, LARRY  
Address: 136 LAKESHORE DR #512  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SD  
Name: HARACZ, RITA  
Address: 130 LAKESHORE DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD  
Name: WIEMOKLY, RICHARD  
Address: 130 LAKESHORE DRIVE, # 622  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D  
Name: STARR, FREDERICK  
Address: 134 LAKESHORE DRIVE, # T14  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: LARRY WITKIN

PRES

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date