2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR) FILED DOCUMENT # 728531 Mar 12, 2007 08:00 AM 1. Entity Name **Secretary of State** WENDIMERE VILLAS PHASE II CONDOMINIUM APARTMENTS ASSOCIATION, INC. Principal Place of Business Maifing Address P.O. BOX 4535 TEQUESTA FL 33469 P.O. BOX 4535 TEQUESTA FL 33469 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & Stato 4. FEI Number 59-1768589 Not Applicable Zip Country Country \$8.75 Additional 5. Cortificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YATES-SINGER, SHIRLEY Street Address (P.O. Box Number is Not Acceptable) 413 CYPRESS DR #2 **TEQUESTA FL 33469** City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition 1:1110 ☐ Defete HHE NAME NAME BONVENUTO, KIM U00000665443 03/23/07-80029-014 70.00 STREET ADDRESS STRUET ADDRESS 417 CYPRESS DR#11 CITY-ST-7IP CUY+SI-7IP TEQUESTA FL 33469 Change Addition ☐ Delete TIME PDD TITLE NAME COOPER, DAVID NAME STREET ADDRESS STREET ADDRESS 415 CYPRESS DR #7 CHY-SI-ZIP TEQUESTA FL 33469 CITY-S1-ZIP mie Delete □ Change ☐ Addition TDD NAME: NAME YATES-SINGER, SHIRLEY STREET ADDRESS STREET ADDRESS 413 N CYPRESS DR. # 2 CHY-SI-7P CITY: \$1-7P TEQUESTA FL 33469 ☐ Addition ☐ Delete HILE ☐ Chance TIME SD NAMI NAME BROOKS, BRENDA STREET ADDRESS STREET ADDRESS 413 CYPRESS DR #4 CHY-SI-ZIP CHY-ST-7IP TEQUESTA FL 33469 1011 ☐ Delete TITLE □ Change Addition NAMI NAMI STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 eath; 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

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

THE

NAME

☐ Delete

☐ Change

Addition

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