2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729585

FILED May 07, 2006 Secretary of State

Entity Name: HERITAGE MANOR SOUTH NO. II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 354 P.O. BOX 354 1163 SOUTH LOOP BOULEVARD 1400 HOMESTEAD ROAD NORTH LEHIGH ACRES, FL 339700354 LEHIGH ACRES, FL 339700354 **Current Mailing Address:** New Mailing Address: P.O. BOX 354 P.O. BOX 354 1163 SOUTH LOOP BOULEVARD 1400 HOMESTEAD ROAD NORTH LEHIGH ACRES, FL 339700354 LEHIGH ACRES, FL 339700354 FEI Number: 59-1574146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LORENZ, SIEGFRIED ELLIOTT, FRED 420 LEE BLVD 1400 HOMESTEAD ROAD NORTH LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33936 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: FRED ELLIOTT 05/07/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SIEGFRIED, LORENZ Name: Name: 2001 PETRUCKA CIRCLE SE Address: Address: City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: Title: TDSD () Delete Title: SD (X) Change () Addition Name: ELLIOTT, FRED Name: ELLIOTT, FRED SEC Address: 1400 HOMESTEAD RD N Address: 1400 HOMESTEAD RD N City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936 Title: () Delete Title: () Change (X) Addition LEVINE, RICHARD TREA Name: Name: 853 PORTER STREET Address: Address: City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information supplied with this filing does not qualify for the 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: FRED ELLIOTT SD 05/07/2006