

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 24, 2003 8:00 am**  
**Secretary of State**

03-24-2003 90160 004 \*\*\*\*61.25

**DOCUMENT # 734971**

1. Entity Name  
**CORAL SPRING GARDENS EAST II ASSOCIATION, INC.**



Principal Place of Business

**9365 W SAMPLE ROAD  
SUITE 203-A  
CORAL SPRINGS FL 33065  
US**

Mailing Address

**9365 W SAMPLE ROAD  
SUITE 203-A  
CORAL SPRINGS FL 33065  
US**

2. Principal Place of Business

3. Mailing Address

**P.O. Box 8506**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**CORAL SPRINGS, FL**

Zip

Country

Zip **33075**

Country

4. FEI Number **59-1709588**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SAATHOFF, ANNE M.  
9365 W SAMPLE ROAD  
SUITE 203-A  
CORAL SPRINGS FL 33065**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD**  Delete  
NAME **BRODERSON, ERIC**  
STREET ADDRESS **9365 W SAMPLE ROAD**  
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE  Change  Addition  
NAME  
STREET ADDRESS **P.O. Box 8506**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33075**

TITLE **VD**  Delete  
NAME **PENAGOS, BENJAMIN**  
STREET ADDRESS **9365 W SAMPLE ROAD**  
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE  Change  Addition  
NAME  
STREET ADDRESS **P.O. Box 8506**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33075**

TITLE **STD**  Delete  
NAME **HERNANDEZ, IVAN**  
STREET ADDRESS **9365 W SAMPLE ROAD**  
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE  Change  Addition  
NAME **STD**  
STREET ADDRESS **GONZALEZ, ILSE**  
CITY-ST-ZIP **P.O. Box 8506**  
**CORAL SPRINGS, FL 33075**

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: **SIGATURE RECAHNER** **Broderson** **3/19/03** **954-752-4786**

CR2E037 (10/02)