## FILED Feb 18, 2008 8:00 am Secretary of State

2008 NOT-FOR-PROFIT CORP	OKATION
ANNUAL REPORT	

Mallion Address   Pack Milker Nie   1260 WHITEMALL DRIVE   FORT MYERS, FL 33901 US   Suite   April 4 std.   1260 WHITEMALL DRIVE   FORT MYERS, FL 33907   Suite   April 4 std.   1260 WHITEMALL DRIVE   FORT MYERS, FL 33907   Suite   April 4 std.   1260 WHITEMALL DRIVE   FORT MYERS, FL 33907   Suite   April 4 std.   FET Number   So   Page 5615   An Applicable   An Applicable   So   Page 5615   An Applicable   An Applicable   So   Page 5615   An Applicable   An Applicable   So   Page 5615   An Applicable   So   Page 5615   An Applicable   An Applicable   So   Page 5615   And App	DOCUMENT # 737409  1. Entity Name THE WESTCHESTER CONDOMINIUM ASSOCIATION UNIT II, INC.						• • 1	02-18-2008	8 90018 00	3 ****61	.25
Suite, Apt. F. etc.   Sp. 1995615   No. Applicable For 59-1995615   No. Applicable For 59-	2264 WINKLE	ER AVE	12650 WHIT	12650 WHITEHALL DRIVE .			- (50))) (FES)	ı ikilir i <b>zbin diz</b> il <b>balla</b>	18(1 8/81) 8/8(4 B)(\$1	ı biblir elleri sizli	lisi si IPSI
City & Siste  City & FL  Zip Codo  Ci	2. Principal Pl	lace of Business - No P.O. Box #	3. Mailing Address								
Secretaria of Status Desired   Set 75 Additional   Set 75 Additi	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			•	01292008	Chg-NP	CR2E03	7 (12/06)	
S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  VANDALL, BONITA D 12650 WHITEHALL DRIVE FORT MYERS, FL 33907  City FL Zip Code  6. The above named entity submits this statement for the purpose of chenging its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am f	City & State	В	City & Stat	City & State							
VANDALL, BONITA D 12650 WHITEHALL DRIVE FORT MYERS, FL 33907  City  FL Zip Code  8. The above named entiry 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in t	Zip				Country				, – ,	ee Required	
VANDALL, BONITA D 12650 WHITEHALL DRIVE FORT MYERS, FL 33907  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:  Filling Fee its 561.25  Due by May 1, 2008  9. Election Campaign Financing Trust Fund Contribution.  Defice Profices and Directions  10. OPFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICES AND DIRECTORS IN 10  BREWINSTON, PAUL  SIRET MORESS  DUE SET MYERS, FL 33901  TILE  DEGREE WINKLER AVE #104  GITY-SI-2P  FORT MYERS, FL 33901  TILE  SIRET MORESS  CONT-SI-2P  FORT MYERS, FL 33901  TILE  SIRET MORESS  CONT-SI-2P  FORT MYERS, FL 33901  TILE  MAKE  CARNER, GENE  CHYSI-2P  FORT MYERS, FL 33901  TILE  MAKE  CARNER, GENE  CHYSI-2P  FORT MYERS, FL 33901  TILE  MAKE  CARNER, GENE  CHYSI-2P  FORT MYERS, FL 33901  TILE  MAKE  CARNER, GENE  CHYSI-2P  FORT MYERS, FL 33901  TILE  MACOCSKEY, JERRY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACOCSKEY  MACO		6. Name and Address of Current	Registered Agen	<u>t                                      </u>	Nome		7. Name and	Address of New	Registered A	gent	
ENT MYERS, FL 33907    City   FL   Zip Code						Address (F	P.O. Box Numbe	er is Not Accepta	ble)		
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 present named in registered agent and also a spokuse.   (NOTE Registerer Apent Appears required when recessing)   DATE						· · · ·			- :,		
SIGNATURE    Signature trood or consider agent and state if applicable   NOTE Registered Agent acquired when remotating)   DATE					City				FL	Zip Code	•
Signature, Speed or correlat name of importance against and alls a applicable   NOTE: Registered Against synature required when recreating)   DATE											
Filing Fee is \$61.25 Due by May 1, 2008  Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WPD WAME STREET ADDRESS 2264 WINKLER AVE #104 CITY-SI-ZIP FORT MYERS, FL 33901  TITLE  STREET ADDRESS CITY-SI-ZIP FORT MYERS, FL 33901  TITLE  CARNER, GENE STREET ADDRESS CITY-SI-ZIP FORT MYERS, FL 33901  TITLE  MAME CARNER, GENE STREET ADDRESS CITY-SI-ZIP FORT MYERS, FL 33901  TITLE  TD  MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP TITLE  MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP TITLE  MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP MCCOSKEY, JERRY MCCOSKEY, JERRY STREET ADDRESS CITY-SI-ZIP MCCOSKEY, JERRY MCCOSKEY MCCOSKEY, JERRY MCCOSKEY MCCOSKEY MCCOSKEY MCCOSKEY MCCOSKEY MCCOSKEY MCCOSKEY M	SIGNATURE										
Due by May 1, 2008											
TITLE NAME STREET ADDRESS CITY-SI-ZIP NAME STREET ADDRESS CITY-SI-ZIP STREE		Stgnature, typed or printed name of registered agen	and title if applicable.	(NOTE: R	legistered Agent signa	sture required	when reinstating)		DATE		
CITY-ST-ZIP FORT MYERS, FL 33901  TITLE  DAME SHAFER, LARRY SHEET ADDRESS 2264 WINKLER AVE #315 FORT MYERS, FL 33901  TITLE SD CITY-ST-ZIP FORT MYERS, FL 33901  TITLE SD CITY-ST-ZIP FORT MYERS, FL 33901  TITLE NAME CARNER, GENE 2264 WINKLER AVE #315 FORT MYERS, FL 33901  TITLE NAME MCCOSKEY, JERRY SIREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE NAME SIREET ADDRESS CITY-ST-ZIP OPERATOR STATE CITY-ST-ZIP OPERATOR STATE OPERATOR S		Filing Fee is \$61.25	9. [	Election Camp	aign Financing	. 🗆	\$5.00 May Be Added to Fees	FI	Make check orida Depart	ment of St	ate
CITY-ST-ZIP FORT MYERS, FL 33901  TITLE  DAME SHAFER, LARRY SHEET ADDRESS 2264 WINKLER AVE #315 FORT MYERS, FL 33901  TITLE SD CITY-ST-ZIP FORT MYERS, FL 33901  TITLE SD CITY-ST-ZIP FORT MYERS, FL 33901  TITLE NAME CARNER, GENE 2264 WINKLER AVE #315 FORT MYERS, FL 33901  TITLE NAME MCCOSKEY, JERRY SIREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE NAME SIREET ADDRESS CITY-ST-ZIP OPERATOR STATE CITY-ST-ZIP OPERATOR STATE OPERATOR S	10.	Filing Fee is \$61.25 Due by May 1, 2008	9. [	Election Camp	aign Financing		\$5.00 May Be Added to Fees	ANGES TO OFFIC	Make check orida Depart	ment of St	ate 10
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NAME STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE TD NAME MCCOSKEY, JERRY STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE TD NAME MCCOSKEY, JERRY STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE TD Delete TITLE TD MCCOSKEY, JERRY STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901  TITLE TITLE TO MCCOSKEY, JERRY STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CAddition NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP Delete TITLE TD Change CADDITION CHANGE STREET ADDRESS CITY-ST-ZIP DELET TO T	TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  VPD BREWINGTON, PAUL 2264 WINKLER AVE #104	9. I	Election Camp Trust Fund Cor	aign Financing ntribution.  11.  IIILE  NAME  STREET ADDRESS	D BRE 226	\$5.00 May B Added to Fees ADDITIONS/CH/ WINGTO/	ANGES TO OFFICE  ANGES	Make check orida Depart CERS AND DIR	ment of St ECTORS IN Change 10 #	ate 10
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 1.19. Florida Statutes, if urther certify that the information indicated on this genory or supplemental genory is true and accurate and that my simple mental have the same legal effect as if mode under early that Legal or director.	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  VPD BREWINGTON, PAUL 2264 WINKLER AVE #104 FORT MYERS, FL 33901 D SHAFER, LARRY 2264 WINKLER AVE #210 FORT MYERS, FL 33901 SD CARNER, GENE 2264 WINKLER AVE #315 FORT MYERS, FL 33901 TD MCCOSKEY, JERRY 2264 WINKLER AVE #308	9. I	Delete  Delete  Delete	aign Financing ntribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DRES 26 PD PD 26 PD 2	\$5.00 May BI Added to Fees ADDITIONS/CHI WINGTON Y WINKL T MY BERZH Y WINKL T MY OSKEY, Y WINK Y WINK T MY OSKEY, Y WINK T MY OSKEY, Y WINK	ANGES TO OFFIN N, PAUL LER A ERS, F CRAVE ERS, F HN, PH LER AVE ERS, F LER AVE ERS, F LER AVE ERS, F LER AVE LER AV	Make check orida Depart  CERS AND DIR  VE # 1  2 339  # 210  - 339  // - 339  // - 3390  - 15 # 1  - 3390  // - 3390  // - 3390  // - 3390  // - 3390  // - 3390	ment of St  EECTORS IN  Change  O   Change  Change	Addition  Addition  Addition

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:X	Thater	LARRY.	SHAFER	2-10-08	239-936-2429
		IGNING OFFICER OR DIRECTOR		Date	Daytime Phone #