

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90240 020 ****61.25

DOCUMENT # 739759

1. Entity Name
ISLA MERITA HOMEOWNERS' CONDOMINIUM ASSOCIATION II, INC.

Principal Place of Business Mailing Address
 P. O. BOX 290281 P. O. BOX 290281
 DAVIE FL 33329 DAVIE FL 33329



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
59-1797766 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WENTWORTH, DONNA
3626 E BELL DR
DAVIE FL 33328

7. Name and Address of New Registered Agent
 Name **Hoover, Richard**
 Street Address (P.O. Box Number is Not Acceptable) **3672 E Forge Rd.**
 City/State/Zip Code **DAVIE FL 33328**

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.
 SIGNATURE: *Richard Hoover* **RICHARD HOOVER** DATE: **4/24/02**
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 Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WALKE, DALE 3621 EAST FORGE RD DAVIE FL 33328 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HOOVER, RICHARD 3672 E FORGE RD DAVIE FL 33328 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S BATTIN, JEAN 3637 WEST FORGE RD DAVIE FL <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MARTIN, MARK 3658 EAST BELL DR DAVIE FL <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LIZZI, FRANK 3612 E FORGE ROAD DAVIE FL 33328 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WENTWORTH, DONNA 3626 EAST BELL DRIVE DAVIE FL <input checked="" type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Sec. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Siretary, Marion 3628 E Forge Rd. DAVIE FL 33328 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Dean Robert Jr. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3662 East Bell Dr DAVIE FL 33328 |

2. 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 another I am empowered.

SIGNATURE: *Richard Hoover* **RICHARD HOOVER** DATE: **4/24/02**

CR2E037 (9/01)