

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# 739759

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

Current Principal Place of Business:

New Principal Place of Business:

P. O. BOX 290281
DAVIE, FL 33329

Current Mailing Address:

New Mailing Address:

GPS MANAGEMENT OF BROWARD
7900 NW 155 STREET SUITE 205
HIALEAH, FL 33016

FEI Number: 59-1797766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOOVER, RICHARD
3672 E. FORGE RD.
DAVIE, FL 33328 US

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete
Name: DOUTRICH, ANITA
Address: 3650 EAST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: D (X) Change () Addition
Name: WENTWORTH, DONNA
Address: 3626 EAST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: P () Delete
Name: HOOVER, RICHARD
Address: 3672 E FORGE RD
City-St-Zip: DAVIE, FL 33328

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Delete
Name: EGAN, RONALD
Address: 3662 EAST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Delete
Name: DOUTRICH, ANITA
Address: 3650 EAST BELL DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: STAPLES, ELIZABETH
Address: 3645 WEST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: TD (X) Change () Addition
Name: STAPLES, ELIZABETH
Address: 3645 WEST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: HENRIQUEZ, JOYCE
Address: 3602 WEST BELL DRIVE
City-St-Zip: DAVIE, FL 33328

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD HOOVER

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date