

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744357

FILED
Apr 21, 2010
Secretary of State

Entity Name: SPRING LAKES VILLAGE II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10090 N.W. 6 LANE
MIAMI, FL 33172 US

New Principal Place of Business:

10130 NW 5 TER
MIAMI, FL 33172 US

Current Mailing Address:

10090 N.W. 6 LANE
MIAMI, FL 33172 US

New Mailing Address:

C/O PMS MANAGEMENT SERVICES CORP.
8299 CORAL WAY
CORAL GABLES, FL 33155 US

FEI Number: 59-1941146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIR
STE 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: PD
Name: DEL BARRIO, GONZALO
Address: 10114 NW 5 TER
City-St-Zip: MIAMI, FL 33172 US

Title: SD
Name: VILLALBA, ISABEL
Address: 10222 NW 5 TERRACE
City-St-Zip: MIAMI, FL 33172 US

Title: VD
Name: LOPEZ, WILLIAM
Address: 10135 NW 4 LANE
City-St-Zip: MIAMI, FL 33172 US

Title: TD
Name: ESTRELLA FABRE, MARGARITA
Address: 10464 NW 5 TERRACE
City-St-Zip: MIAMI, FL 33172 US

Title: D
Name: LOPEZ, OSVALDO
Address: 10090 NW 4 LN
City-St-Zip: MIAMI, FL 33172 US

Title: D
Name: AMADOR, LINDA
Address: 10262 NW 5 TERRACE
City-St-Zip: MIAMI, FL 33172 US

I hereby 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 all other like empowered.

SIGNATURE: ISABEL VILLALBA

SD

04/21/2010

Electronic Signature of Signing Officer or Director

Date

**Property Management Services Corporation**

8299 Coral Way • Miami, Florida 33155
Dade (305) 264-4250 • Fax (305) 266-5762
www.propertymanagecorp.com

744357
4-21-10

Florida Department of State
Division of Corporations

Attn: Sean
Fax # 850-245-6017

Re: Spring Lakes Village II Condominium Association Inc
Document# 744357

Dear Sean:

Please, add a 7th member to the six already entered in the system in the 2010 Annual Report.

Emilio Requena
Position: Director
Address: 10086 NW 5 Terrace
Miami, FL 33172

Contact person: Maritza Martinez
Accounts Payable Dept
305-264-4250

Sincerely,

Maritza Martinez
Accounts Payable Dept
Property Management Services Corp.