2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747379

FILED Feb 02, 2011 Secretary of State

Entity Name: ALTAMONTE VILLAGE II CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

500 SAN SEBASTIAN CT E 500 SAN SEBASTIAN CT E

ALTAMONTE SPRINGS, FL 32724 US ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

PO BOX 150312

ALTAMONTE SPRINGS, FL 327150312 US

FEI Number: 59-2017855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLASSMAN, DAVID N ESQUIRE 112 ANNIE STREET ORLANDO, FL 32806 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:

Γitle: PD

Name: SAGRISTA, MICHAEL

Address: 404 SAN SEBASTIAN CT EAST City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VD

Name: PLATIN, GERMAN

Address: 406 SAN SEBASTIAN CT EAST City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD

Name: GERBER, BETH

Address: 170 LAKE DESTINY TRAIL

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D

 Name:
 COLLINI, STEPHANIE Y

 Address:
 609 SAN SEBSTIAN CT EAST

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714

Title:

Name: LILES, MARIE

Address: 610 SAN SEBASTIAN CT EAST City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: MICHAEL SAGRISTA PRES 02/02/2011