2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 748986

Entity Name: COASTAL II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT.
615 CAPE CORAL PKWY W., #103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT.
P.O. BOX 100399
CAPE CORAL, FL 33910 US

New Mailing Address:

FEI Number: 59-2034469 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KASE, SUSAN
C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W., #103
CAPE CORAL, FL 33914 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:	TD	( ) Delete
Name:	WEBBER, SIDNEY	
Address:	4018 SE 12TH AVENUE #206	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	PD	( ) Delete
Name:	KRAFT, RICHARD	
Address:	4012 SE 12TH AVE, # 210	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	VD	( ) Delete
Name:	LUDESCHER, JIM	
Address:	4018 SE 12TH AVE, # 205	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	SD	( ) Delete
Name:	SHELTON, PHYLLIS	
Address:	4018 SE 12TH AVE 103	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	D	( ) Delete
Name:	TRETTA, BARBARA	
Address:	510 PRESTON COURT	
City-St-Zip:	EXTON, PA 19341	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VPD	(X) Change ( ) Addition
Name:	STURM, RALPH	
Address:	4018 SE 12TH AVE, #105	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VPD	(X) Change ( ) Addition
Name:	TRETTA, BARBARA	
Address:	510 PRESTON COURT	
City-St-Zip:	EXTON, PA 19341	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SIDNEY WEBBER T 04/30/2008

Electronic Signature of Signing Officer or Director — Date