

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750860

FILED  
Mar 14, 2011  
Secretary of State

**Entity Name:** THE TOWNHOMES OF LAKE SEMINOLE CONDOMINIUM NO. 2 ASSOCIATION INC.

**Current Principal Place of Business:**

1301 SEMINOLE BLVD  
SUITE 110  
LARGO, FL 33770 US

**New Principal Place of Business:**

C/O QUALIFIED PROPERTY MGMT INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652 US

**Current Mailing Address:**

1301 SEMINOLE BLVD  
SUITE 110  
LARGO, FL 33770 US

**New Mailing Address:**

C/O QUALIFIED PROPERTY MGMT INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 59-1966987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUALIFIED PROPERTY MANAGEMENT, INC.  
1301 SEMINOLE BLVD  
SUITE 110  
LARGO, FL 33770 US

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

QUALIFIED PROPERTY MANAGEMENT, INC.  
5901 US HWY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652 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: MARY WHITE

03/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: STEPHENS, ROBERT  
Address: 9209 SEMINOLE BLVD, #87  
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP  
Name: SCHMITTAUER, JOE  
Address: 14683 SEMINOLE TRAIL  
City-St-Zip: SEMINOLE, FL 33772 US

Title: SD  
Name: KELLEY, JENNIFER  
Address: 9209 SEMINOLE BLVD, #206  
City-St-Zip: SEMINOLE, FL 33772 US

Title: TD  
Name: MCCORMICK, PATRICK  
Address: 9209 SEMINOLE BLVD, #197  
City-St-Zip: SEMINOLE, FL 33772

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: ROBERT STEPHENS

PD

03/14/2011

Electronic Signature of Signing Officer or Director

Date