2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751727

FILED Feb 28, 2006 Secretary of State

Entity Name: MISTY SPRINGS CONDOMINIUM II ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	SR. 434 SUITE DOD, FL 32779				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	SR. 434 SUITE DOD, FL 32779				
El Numbe	er: 59-2169275	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name an	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
SENTRY 2180 WE: ONGWO	R, JAMES W MANAGEMEN ST SR 434 SU DOD, FL 32779 e named entity te of Florida.	TE 5000 9 US	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
JOINATO		nic Signature of Registered Ag	ent	 Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	RAPONI, LAW 2664 SABAL S	PRINGS CIRCLE #203	Title: Name: Address: City-St-Zip:	() Change () Addition	
ïtle: lame: ddress: city-St-Zip:	SCOTT, KATH 2661 SABAL S	PRINGS CIRCLE, #102	Title: Name: Address: City-St-Zip:	() Change () Addition	
itle:	ACERNO, MAU 2663 SABAL S	PRINGS CIRCLE, #206	Title: Name: Address: City-St-Zip:	() Change () Addition	
ddress:	CLEARWATE		-	() Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	TD (RUSSO, BARF 2666 SABAL S	PRINGS CIRCLE, #201	Title: Name: Address: City-St-Zip:		
oddress: City-St-Zip: Title: Jame: oddress:	TD (RUSSO, BARF 2666 SABAL S CLEARWATER D (MCCAULEY, N 2665 SABAL S	RY SPRINGS CIRCLE, #201 R, FL 33761) Delete MARY SPRINGS CIRCLE, #104	Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: LAWRENCE RAPONI PD 02/28/2006