

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754777

FILED  
Mar 22, 2012  
Secretary of State

**Entity Name:** SPANISH PINES II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

131-145 CYPRESS WAY EAST  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 112524  
NAPLES, FL 34108 US

**New Mailing Address:**

**FEI Number:** 59-2352167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HACHEY, STEPHEN K  
8800 BERNWOOD PARKWAY - SUITE 6  
BONITA SPRINGS, FL 34135 US

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

SAMOUCÉ, MURRELL & GAL, P.A.  
5405 PARK CENTRAL COURT  
NAPLES, FL 34109 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: ALFRED GAL, PA

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STACY, ESTELLA  
Address: 141D CYPRESS WAY E  
City-St-Zip: NAPLES, FL 34110 US

Title: SD  
Name: RINGLEY, LISA  
Address: 141A CYPRESS WAY E  
City-St-Zip: NAPLES, FL 34110

Title: TD  
Name: BONNIE, TURNER  
Address: 135D CYPRESS WAY E  
City-St-Zip: NAPLES, FL 34110

Title: PD  
Name: FOSTER, CANDACE  
Address: 131 F CYPRESS WAY E  
City-St-Zip: NAPLES, FL 34110 US

Title: VPD  
Name: KUPPERMAN, PAUL  
Address: 135F CYPRESS WAY E  
City-St-Zip: NAPLES, FL 34110 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: CANDACE A FOSTER

PD

03/22/2012

Electronic Signature of Signing Officer or Director

Date