

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757258

1. Entity Name

OCEAN TRAIL CONDOMINIUM ASSOCIATION NO. II, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90054 030 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business 100 OCEAN TRAIL WAY JUPITER FL 33477	Mailing Address 100 OCEAN TRAIL WAY #100 JUPITER FL 33477-5537 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2098366	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BARNES, JAMES H.
 100 OCEAN TRAIL WAY #109 304
 JUPITER FL 33477

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME P SCHWAB, INCK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER FL	
TITLE NAME V WALSH, GEORGE	<input type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 00000	
TITLE NAME S DRISCOLL, DAVID	<input type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 00000	
TITLE NAME T MUELLER, CARL	<input type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TRAIL WAY CITY-ST-ZIP JUPITER, FL 00000	
TITLE NAME T BLECHER, JEROME	<input type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 00000	
TITLE NAME D FRISBY, BETSY	<input type="checkbox"/> Delete
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 00000	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME PRESIDENT WALSH, GEORGE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 33477	
TITLE NAME VICE PRESIDENT TERRENCE BROWN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 33477	
TITLE NAME DIRECTOR MAX ETTEMBERG	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 100 OCEAN TR WAY CITY-ST-ZIP JUPITER, FL 33477	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Date: 3-14-00 Daytime Phone #: 561-747-7407

CRP037 (0/00)