

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759024

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** DUPLEX VILLAGE HOMEOWNERS ASSOCIATION II, INC.

**Current Principal Place of Business:**

2240 BELLEAIR RD  
140  
CLEARWATER, FL 33764

**New Principal Place of Business:**

687 ALDERMAN RD.  
UNIT 223  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2240 BELLEAIR RD  
140  
CLEARWATER, FL 33764

**New Mailing Address:**

687 ALDERMAN RD.  
UNIT 223  
PALM HARBOR, FL 34683

**FEI Number:** 59-2186996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAILY, MICHAEL J  
2240 BELLEAIR RD 140  
STE 225  
CLEARWATER, FL 33764 US

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

LANDI, MICHAEL F CPA  
687 ALDERMAN RD.  
UNIT 223  
PALM HARBOR, FL 34683 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: MICHAEL F. LANDI

02/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JUSTIANA, BOB  
Address: 3366 GORSE COURT  
City-St-Zip: PALM HARBOR, FL 37684

Title: D  
Name: FRENCH, JIM  
Address: 3314 GORSE COURT  
City-St-Zip: PALM HARBOR, FL 34684

Title: D  
Name: DIANNE, CROSSON  
Address: 3343 MCMATH DR.  
City-St-Zip: PALM HARBOR, FL 34684

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: BOB JUSTIANA

D

02/17/2010

Electronic Signature of Signing Officer or Director

Date