


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90014 019 ****61.25

DOCUMENT # 760241 1. Entity Name SUN LAKES PROPERTY OWNERS' ASSOCIATION II, INC.					
Principal Place of Business 1809 1808 ADREAN PLACE SUN CITY CENTER FL 33573 US			Mailing Address ELAINE HESTON TREAS. 1807 ADREAN PLACE SUN CITY CENTER FL 33573 US		
2. Principal Place of Business 1809 Adrean Pl. Suite, Apt. #, etc.		3. Mailing Address Gloria Lewis Suite, Apt. #, etc. 1809 Adrean Place		1st MOORE CR2E037 (10/05)	
City & State Sun City Center		City & State Sun City Center		4. FEI Number 59-2120127	
Zip 33573		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HESTON, ELAINE 1807 ADREAN PLACE SUN CITY CENTER FL 33573			7. Name and Address of New Registered Agent Name Gloria Lewis Street Address (P.O. Box Number is Not Acceptable) 1809 Adrean Place City Sun City Center FL Zip Code 33573		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Gloria Lewis <i>Gloria Lewis</i> DATE 2/11/06 <small>Signature, typed or printed name of registered agent and title if applicable</small> <small>NOTE: Registered Agent signature required when reinstating</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD MCLEISH, WILLIAM 1816 ADREAN PL SUN CITY CENTER FL 33573			TITLE NAME STREET ADDRESS CITY-ST-ZIP VD Gerald Ventes 1708 Cloister Drive Sun City Center, FL 33573		
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD LUCAS, IVAN 1811 ADREAN PLACE SUN CITY CENTER FL 33573			TITLE NAME STREET ADDRESS CITY-ST-ZIP TD Gloria Lewis 1809 Adrean Place Sun City Center, FL 33573		
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD SCHASEL, CHARLES 1813 ADREAN PL SUN CITY CENTER FL 33573			TITLE NAME STREET ADDRESS CITY-ST-ZIP PD Ivan Lucas 1811 Adrean Place Sun City Center, FL 33573		
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD HENDERSON, ROBERT 1812 BUTTERFLY PL. SUN CITY CENTER FL 33573			TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Elaine M. Heston* **Elaine M. Heston** **2/11/06** **813-634-5181**