

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 23, 2009
Secretary of State**

DOCUMENT# 762499

Entity Name: LAKE TARPON SAIL AND TENNIS CLUB II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

90 SO. HIGHLAND AVENUE
PATIO #20
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

90 SO. HIGHLAND AVENUE
PATIO #20
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 59-2200773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENNA, GEORGE
90 S. HIGHLAND AVE.
PATIO #14
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COUTURIER, SYLVIA
Address: UNIT 2, 90 S. HIGHLAND AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DT () Delete
Name: BISHOP, CORNELIUS
Address: UNIT 17, 90 S. HIGHLAND AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: PS () Delete
Name: MCKENNA, GEORGE
Address: UNIT 14 90 SOUTH HIGHLAND AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VD () Delete
Name: KRUER, GARY
Address: UNIT 13, 90 S. HIGHLAND AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VD () Delete
Name: KEYES, WILLIAM
Address: UNIT 6 90 S. HIGHLAND AVE
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CORNELIUS A BISHOP

TREA

02/23/2009

Electronic Signature of Signing Officer or Director

Date