

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765829

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** THE CONDOMINIUM ON THE BAY TOWER II ASSOCIATION, INC.

**Current Principal Place of Business:**

N, INC (THE)  
888 BLVD. OF THE ARTS  
SARASOTA, FL 34236

**New Principal Place of Business:**

CONDOMINIUM ON THE BAY TOWER II ASSOC.INC.  
888 BLVD. OF THE ARTS  
SARASOTA, FL 34236

**Current Mailing Address:**

N, INC (THE)  
888 BLVD. OF THE ARTS  
SARASOTA, FL 34236

**New Mailing Address:**

CONDOMINIUM ON THE BAY TOWER II ASSOC.INC.  
888 BLVD. OF THE ARTS  
SARASOTA, FL 34236

**FEI Number:** 59-2296372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VOLPE, CRYSTAL  
888 BLVD OF THE ARTS  
UNIT 108  
SARASOTA, FL 34236 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: P ( ) Delete  
Name: TITCOMB, ROBERT  
Address: 988 BLVD OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: S ( ) Delete  
Name: COPPENRATH, ROBERT  
Address: 888 BLVD. OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: T ( ) Delete  
Name: DISLEY, LANCE  
Address: 988 BLVD OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: VPD ( ) Delete  
Name: WISDOM, HOWARD  
Address: 988 BLVD. OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: KAUZLARICH, EUGENE  
Address: 888 BLVD. OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

**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: ROBERT COPPENRATH

S

04/13/2009

Electronic Signature of Signing Officer or Director

Date