


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90040 047 ****61.25

DOCUMENT # 771099 1. Entity Name WL TWO HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 10191 WEST SAMPLE ROAD, SUITE 203 CORAL SPRINGS FL 33065			Mailing Address C/O J & L PROPERTY MANAGEMENT, INC. 10191 WEST SAMPLE ROAD, SUITE 203 CORAL SPRINGS FL 33065		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2378094	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CALDERAZZO, JAMES 10191 W. SAMPLE RD. POMPAÑO BEACH FL 33065				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE _____ (NOTE: Registered Agent signature required when registering)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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	PVPD HAYES, CLARENCE 10009 WINDING LAKE ROAD, #103 SUNRISE FL		TITLE NAME STREET ADDRESS CITY ST ZIP	DIRECTOR MICHAEL PORTER 10029 WINDING LAKE ROAD # 202 SUNRISE, FL 33351	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD WEINTRAUB, LENI 10007 WINDING LAKE ROAD 202 SUNRISE FL 33351		TITLE NAME STREET ADDRESS CITY ST ZIP	DIRECTOR BROWN, BRENDA 10007 WINDING LAKE ROAD #203 SUNRISE, FL 33351	
TITLE NAME STREET ADDRESS CITY ST ZIP	VP YOUNG, MYRTLE 10016 WINDING LAKE RD. SUNRISE FL 33351		TITLE NAME STREET ADDRESS CITY ST ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	D GREENFIELD, IAN 10016 WINDING LAKE RD SUNRISE FL 33351		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	
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: <i>IAN GREENFIELD</i> 2-7-07 954-270-8299					