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2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

DOCUMENT #

F97000006369

1. Entity Name

SEA RANCH COMMUNITY DEVELOPMENT II, INC.



Principal Place of Business Mailing Address 312 S.E. 17TH STREET, SUITE 300 312 S.E. 17TH STREET, SUITE 300 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number City & State Applied For 65-0798024 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PALMER, CHARLES L Street Address (P.O. Box Number is Not Acceptable) % NORTH AMERICAN COMPANY LTD. 312 S.E. 17TH STREET, SUITE 300 FORT LAUDERDALE FL 33316 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PC00 Delete TITLE " TITLE Change Change ☐ Addition COLLINS, WALTER NAME NAME 312 S.E. 17TH STREET, SUITE 300 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33316 CITY-ST-ZIP CITY-ST-7IP TITLE VC ☐ Delete TITLE Change ☐ Addition NAME WILSON, JOY NAME STREET ADDRESS 312 S.E. 17TH STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CEOD NAME NAME PALMER, CHARLES L STREET ADDRESS STREET ADDRESS 312 S.E. 17TH STREET, SUITE 300 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33316 ☐ Defete Change TITLE AS TITLE ☐ Addition NAME DRESSLER, SHARON NAME STREET ADDRESS STREET ADDRESS 312 S.E. 17TH STREET, SUITE 300 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33316 TITLE □ Delete TITLE Change ☐ Addition NAME CONTRELL, WILLIAM NAME STREET ADDRESS 312 SE 17TH ST STE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33316 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: