

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007389

FILED
Apr 23, 2009
Secretary of State

Entity Name: WILSHIRE PINES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-1056004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: TD () Delete
Name: MORAN, JIM
Address: 6225 WILSHIRE PINES CIRCLE #1501
City-St-Zip: NAPLES, FL 34109

Title: SD () Delete
Name: AHERN, JIM
Address: 6280 WILSHIRE PINES CIRCLE # 901
City-St-Zip: NAPLES, FL 34109

Title: PD () Delete
Name: HATCH, LINDA
Address: 6225 WILSHIRE PINES CIRCLE #1
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORAN, JIM
Address: 6225 WILSHIRE PINES CIRCLE #1501
City-St-Zip: NAPLES, FL 34109

Title: STD (X) Change () Addition
Name: AHERN, JIM
Address: 6280 WILSHIRE PINES CIRCLE # 901
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: MEHLER, CHARLES
Address: 1120 HILLCREST PATH
City-St-Zip: MANASQUAN, NJ 08736

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: JAMES MORAN

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date