

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003050

FILED
Mar 23, 2011
Secretary of State

Entity Name: CEDAR HAMMOCK HOMEOWNERS ASSOCIATION II, INC.

Current Principal Place of Business:

12734 KENWOOD LN
49
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

TROPICAL ISLES MGMT
12734 KENWOOD LANE, STE 49
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-1112808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROPICAL ISLES MGMT
12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 33907 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: VP
Name: MINAMYER, LARRY
Address: 3720 BUTTONWOOD WAY
City-St-Zip: NAPLES, FL 34112

Title: ST
Name: FULTON, CAROLYN
Address: 3849 WAX MURTLERUN
City-St-Zip: NAPLES, FL 34112

Title: P
Name: LAWRENCE, BROOKE
Address: 3860 WAX MYRTLE RUN
City-St-Zip: NAPLES, FL 34112

I hereby 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 all other like empowered.

SIGNATURE: BROOKE LAWRENCE

P

03/23/2011

Electronic Signature of Signing Officer or Director

Date