

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 10, 2006
Secretary of State

DOCUMENT# N01484

Entity Name: COUNTRY LANE CONDOMINIUM NO.2 ASSOCIATION, INC.**Current Principal Place of Business:**17000 N.W. 67TH AVENUE
#335
MIAMI, FL 33015 US**New Principal Place of Business:**17000 N.W. 67TH AVENUE
#502
MIAMI, FL 33015 US**Current Mailing Address:**COUNTRY LANE/ BEST WAY
14853 N.E. 20 AVE.
NO. MIAMI, FL 33181 US**New Mailing Address:**COUNTRY LANE
17000 NW 67 AVENUE, #502
MIAMI, FL 33015 US**FEI Number:** 59-2516760**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BEST WAY PMC
14853 N.E. 20 AVE.
NO. MIAMI, FL 33181 US**Name and Address of New Registered Agent:**FRANK WESOLOWSKI
17000 NW 67 AVENUE
244
MIAMI, FL 33015 US

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: FRANK P. WESOLOWSKI

05/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: WESOLOWSKI, FRANK
Address: 1700 NW 67TH AVENUE #244
City-St-Zip: MIAMI, FL 33015**Title:** D () Delete
Name: LOESCHE, SYLVIA
Address: 17000 NW 67TH AVE, # 147
City-St-Zip: MIAMI, FL 33015**Title:** T () Delete
Name: MCKOY, SHIRLEY
Address: 17000 NW 67TH AVE # 335
City-St-Zip: MIAMI, FL 33015**Title:** SEC () Delete
Name: SCHAEFER, ANDREA
Address: 17000 NW 67 AVE UNIT 433
City-St-Zip: MIAMI, FL 33015**Title:** VP () Delete
Name: DOUNVEOR, BOYD
Address: 17000 NW 67 AVE UNIT 204
City-St-Zip: MIAMI, FL 33015**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES (X) Change () Addition
Name: WESOLOWSKI, FRANK P
Address: 17000 NW 67TH AVENUE #244
City-St-Zip: MIAMI, FL 33015**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 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: FRANK P. WESOLOWSKI

PRES

05/10/2006

Electronic Signature of Signing Officer or Director

Date