

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 31, 2009
Secretary of State

DOCUMENT# N01484

Entity Name: COUNTRY LANE CONDOMINIUM NO.2 ASSOCIATION, INC.**Current Principal Place of Business:**17000 N.W. 67TH AVENUE
#244
MIAMI, FL 33015 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 661554
MIAMI SPRINGS, FL 33266 US**New Mailing Address:**TPS MANAGEMENT
P.O. BOX 661554
MIAMI SPRINGS, FL 33266 US**FEI Number:** 59-2516760**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STRALEY & OTTO, P.A.
2699 STIRLING RD.
SUITE C-207
FT LAUDERDALE, FL 33312 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: P () Delete
Name: WESOLOWSKI, FRANK
Address: 17000 NW 67TH AVENUE #244
City-St-Zip: MIAMI, FL 33015

Title: S () Delete
Name: LOESCHE, SYLVIA
Address: 17000 NW 67TH AVE, # 147
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: MCKOY, SHIRLEY
Address: 17000 NW 67TH AVE # 335
City-St-Zip: MIAMI, FL 33015

Title: T () 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 224
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LOESCHE, SYLVIA
Address: 17000 NW 67TH AVE, # 147
City-St-Zip: MIAMI, FL 33015

Title: S (X) Change () Addition
Name: MCKOY, SHIRLEY
Address: 17000 NW 67TH AVE # 335
City-St-Zip: MIAMI, FL 33015

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DOUNVEOR, BOYD H
Address: 17000 NW 67 AVE UNIT 224
City-St-Zip: MIAMI, FL 33015

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: FRANK WESOLOWSKI

P

07/31/2009

Electronic Signature of Signing Officer or Director

Date