

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01484

FILED
Mar 19, 2010
Secretary of State

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:

TPS MANAGEMENT
P.O. BOX 661554
MIAMI SPRINGS, FL 33266 US

New Mailing Address:

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: PD
Name: WESOLOWSKI, FRANK
Address: 17000 NW 67TH AVENUE #244
City-St-Zip: MIAMI, FL 33015

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

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

Title: TD
Name: SCHAEFER, ANDREA
Address: 17000 NW 67 AVE UNIT 433
City-St-Zip: MIAMI, FL 33015

Title: VD
Name: DOUNVEOR, BOYD H
Address: 17000 NW 67 AVE UNIT 224
City-St-Zip: MIAMI, FL 33015

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: IRMA MATOS

LCAM

03/19/2010

Electronic Signature of Signing Officer or Director

Date