## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01484

FILED Jan 25, 2011 Secretary of State

Entity Name: COUNTRY LANE CONDOMINIUM NO.2 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

17000 N.W. 67TH AVENUE 17000 N.W. 67TH AVENUE #244 MIAMI, FL 33015 US

MIAMI, FL 33015 US

Current Mailing Address: 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: Name and Address of New Registered Agent:

STRALEY & OTTO, P.A. 2699 STIRLING RD. SUITE C-207 FT LAUDERDALE, FL 33312 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: WESOLOWSKI, FRANK Address: P O BOX 661554

City-St-Zip: MIAMI SPRINGS, FL 33266 US

Title: D

Name: LOESCHE, SYLVIA Address: P O BOX 661554

City-St-Zip: MIAMI SPRINGS, FL 33266 US

Title: SD

Name: MCKOY, SHIRLEY Address: P O BOX 661554

City-St-Zip: MIAMI SPRINGS, FL 33266 US

Title: TD

Name: SCHAEFER, ANDREA Address: P O BOX 661554

City-St-Zip: MIAMI SPRINGS, FL 33266 US

Title: VD

Name: DOUNVEOR, BOYD H Address: P O BOX 661554

City-St-Zip: MIAMI SPRINGS, FL 33266 US

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: FRANK WESOLOWSKI PD 01/25/2011