

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005429

FILED
Apr 30, 2007
Secretary of State

Entity Name: REGENCY PINES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1515 N. HUNTINGTON LANE
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

REGENCY PINES II
PO BOX 561476
ROCKLEDGE, FL 329561476

New Mailing Address:

FEI Number: 51-0443979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNR, JIM
1331 BEDFORD DR. #103
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

KENNEY, JIM
1331 BEDFORD DR. #103
MELBOURNE, FL 32940 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: JIM KENNEY

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, DIANE
Address: 1515 HUNTINGTON LANE #1015
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP () Delete
Name: PAUST, MARCELLE
Address: 1515 HUNTINGTON LANE #913
City-St-Zip: ROCKLEDGE, FL 32955

Title: ST () Delete
Name: REILLY, EUGENE M
Address: 1515 HUNTINGTON LANE #914
City-St-Zip: ROCKLEDGE, FL 32955

Title: S (X) Delete
Name: KENNEDY, BETTY
Address: POB 561476
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Delete
Name: MULLEN, PATRICIA
Address: POB 561476
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MULLEN, PATRICIA
Address: 1331 BEDFORD DRIVE #103
City-St-Zip: MELBOURNE, FL 32940

Title: VP (X) Change () Addition
Name: SPELLMAN, JAMES
Address: 1331 BEDFORD DR. #103
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change () Addition
Name: BISHOP, RON
Address: 1331 BEDFORD DR. #103
City-St-Zip: MELBOURNE, FL 32940

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 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: JIM KENNEY

RA

04/30/2007

Electronic Signature of Signing Officer or Director

Date