

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90204 043 \*\*\*\*61.25

<b>DOCUMENT # N02000007869</b>					
<b>1. Entity Name</b> VILLAS DE LA COSTA CONDOMINIUM ASSOCIATION II, INC.					
<b>Principal Place of Business</b> 538 N.E. 48TH STREET BOCA RATON, FL 33431			<b>Mailing Address</b> 538 N.E. 48TH STREET BOCA RATON, FL 33431		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b> 90 SW 11TH AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b>		Boca RATON, FL		<b>4. FEI Number</b> 05-0543060	
<b>Zip</b>		33486		<b>Country</b> USA.	
<b>6. Name and Address of Current Registered Agent</b> CURTIS, WILLIAM C. 538 NE 48 STREET BOCA RATON, FL 33431				<b>7. Name and Address of New Registered Agent</b> Name: WILLIAM P. SNOW Street Address (P.O. Box Number is Not Acceptable): 90 SW 11TH AVE City: Boca RATON FL Zip Code: 33486	
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> SIGNATURE: <u>WILLIAM P. SNOW, PRESIDENT William P. Snow</u> 4/22/2007 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	PSTD CURTIS, WILLIAM C. 538 N.E. 48TH STREET BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	P/D WILLIAM P. SNOW 90 SW 11TH AVE BOCA RATON, FL 33486	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	D MANGS, JOHAN F 540 NE 48TH STREET BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	V/D WILLIAM C. CURTIS 538 N.E. 48TH STREET BOCA RATON, FL 33431	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	D SNOW, WILLIAM P 90 SW 11TH AVENUE BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	S/D GLADYS PAGER 561 NE 47TH STREET BOCA RATON, FL 33431	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <u>William P. Snow WILLIAM P. SNOW</u> 4/22/2007 954-782-8222 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					