


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90051 002 ****61.25

DOCUMENT # N03000005432					
1. Entity Name JASMINE POINTE II AT CARLTON LAKES, INC.					
Principal Place of Business C/O PEGASUS PROPERTY MANAGEMENT 17595 S. TAMiami TRAIL, SUITE 100 FORT MYERS, FL 33908			Mailing Address C/O PEGASUS PROPERTY MANAGEMENT 17595 S. TAMiami TRAIL, SUITE 100 FORT MYERS, FL 33908		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 33-1085551	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SWALM & BOURGEOIS & DAVIES, PA 2375 TAMiami TRAIL N STE 308 NAPLES, FL 34103			Name <u>CT Corporation Systems</u> Street Address (P.O. Box Number is Not Acceptable) <u>Ste. 250</u> <u>1200 South Pine Island Road</u> City <u>Plantation</u> FL Zip Code <u>33324</u>		
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.					
SIGNATURE <u>Lauren Greco</u>		Lauren Greco Assistant Secretary		DATE <u>1/7/05</u>	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD C/OMEAU, PETER 2907 BAY TO BAY BLVD #202 TAMPA, FL 33629	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FORKELL, DANIEL 2907 BAY TO BAY BLVD #301 TAMPA, FL 33629	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CAMPBELL, JOHN 12730 NEW BRITTANY BLVD., STE 403 FORT MYERS, FL 33908	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
SIGNATURE: <u>Peter B. Comeau</u>		Date <u>1-11-05</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # <u>813-835-9200</u>			

50012650



01052005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

\$8.75 Additional Fee Required

Name CT Corporation Systems
 Street Address (P.O. Box Number is Not Acceptable) Ste. 250
1200 South Pine Island Road
 City Plantation FL Zip Code 33324

Lauren Greco
Assistant Secretary

DATE 1/7/05

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
 Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Make check payable to
Florida Department of State

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD C/OMEAU, PETER 2907 BAY TO BAY BLVD #202 TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FORKELL, DANIEL 2907 BAY TO BAY BLVD #301 TAMPA, FL 33629
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Peter B. Comeau <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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SIGNATURE: Peter B. Comeau Date 1-11-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # 813-835-9200