

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90009 007 ****61.25

DOCUMENT # N03000009741

1. Entity Name
**MAIN STREET TOWN HOMES HOMEOWNERS
ASSOCIATION II, INC.**



Principal Place of Business
**3432-3448 NE 13 AVE
OAKLAND PARK, FL 33334**

Mailing Address
**PO BOX 70302
OAKLAND PARK, FL 33307**



2. Principal Place of Business - No P.O. Box #		3. Mailing Address		03262008 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number NOT APPLICABLE	
City & State		City & State		Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	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	
ANTONELLO, GRACE 3328 NE 11 AVE OAKLAND PARK, FL 33334		Name Street Address (P.O. Box Number is Not Acceptable) City	
		State FL Zip Code	

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ROGERSON, RODNEY 3444 NE 13 AVE OAKLAND PARK, FL 33334 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES WILLFORD, LARRY 3442 NE 13 AVE OAKLAND PARK, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FRICK, RODNEY 3434 NE 13 AVE OAKLAND PARK, FL 33334 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC WILFORD, LARRY 3442 NE 13 AVE OAKLAND PARK, FL 33334 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC YOUNGLESAN, JUSTINE 3436 NE 13 AVE OAKLAND PARK, FL 33334 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA TRUSIVICH, GREGORY 3448 NE 13TH AVE OAKLAND PARK, FL 33334 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Gregory Trusivich **GREGORY TRUSIVICH** 3/25/08 954-568-7055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

40054420
#N03000009741FLORIDA DEPARTMENT OF STATE
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No Events

No Name History

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MAIN STREET TOWN HOMES HOMEOWNERS ASSOCIATION II, INC.

Filing Information

Document Number N03000009741

FEI Number N/A

Date Filed 11/04/2003

State FL

Status ACTIVE

Principal Address3432-3448 NE 13 AVE
OAKLAND PARK FL 33334

Changed 04/04/2006

Mailing AddressPO BOX 70302
OAKLAND PARK FL 33307

Changed 04/04/2006

Registered Agent Name & AddressANTONELLO, GRACE
3328 NE 11 AVE
OAKLAND PARK FL 33334**Officer/Director Detail****Name & Address**

Title PRES

ROGERSON, RODNEY
3444 NE 13 AVE
OAKLAND PARK FL 33334

Title VP

FRICK, RODNEY
3434 NE 13 AVE
OAKLAND PARK FL 33334

Title SEC

WILFORD, LARRY
3442 NE 13 AVE
OAKLAND PARK FL 33334

Title TREA

TRUSIVICH, GREGORY

40054420
#N03000009741

3448 NE 13TH AVE
OAKLAND PARK FL 33334

Annual Reports

Report Year Filed Date

2005	03/29/2005
2006	04/04/2006
2007	01/11/2007

Document Images

01/11/2007 -- ANNUAL REPORT	View image in PDF format
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