

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000621

FILED
Mar 30, 2009
Secretary of State

Entity Name: THE RESERVE II AT BANYAN WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3050 N. HORESHOE DRIVE
275
NAPLES, FL 34104

New Principal Place of Business:

1661 TRADE CENTER WAY
2
NAPLES, FL 34109

Current Mailing Address:

3050 N. HORESHOE DRIVE
275
NAPLES, FL 34104

New Mailing Address:

1661 TRADE CENTER WAY
2
NAPLES, FL 34109

FEI Number: 20-0833352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER TRIAD MGT.
3050 N. HORSESHOE DRIVE
SUITE 275
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

C/O ACMS
1661 TRADE CENTER WAY
#2
NAPLES, FL 34109 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: WANDA PEARSON

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FITZPATRICK, WILLIAM
Address: 3050 N. HORSESHOE DRIVE # 275
City-St-Zip: NAPLES, FL 34104

Title: VP () Delete
Name: STUCKEY, ROY
Address: 5008 MAXWELL CIR #101
City-St-Zip: NAPLES, FL 34105

Title: T () Delete
Name: MOLBERT, JANE
Address: 5055 BLAUVELT WAY #102
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: MOLBERT, JANE
Address: 5055 BLAUVELT WAY #102
City-St-Zip: NAPLES, FL 34105

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: WILLIAM FITZPATRICK

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date