


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 10, 2007 8:00 am**  
**Secretary of State**

04-10-2007 90017 009 \*\*\*\*61.25

<b>DOCUMENT # N04000005926</b>	
1. Entity Name <b>UPPER NORTH BAY ROAD HOMEOWNERS' ASSOCIATION II, INC.</b>	

Principal Place of Business <b>960 ARTHUR GODFREY ROAD SUITE 116 MIAMI BEACH FL 33140</b>	Mailing Address <b>960 ARTHUR GODFREY ROAD SUITE 116 MIAMI BEACH FL 33140</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

1st MOORE CR2E037 (10/06)

4. FEI Number <b>55-0891819</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>FRANKEL, JUDITH A 960 ARTHUR GODFREY ROAD SUITE 116 MIAMI BEACH FL 33140</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 necessary) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:**

*Judith Frankel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/07

Date

305-674-1313

Daytime Phone #