

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2005 8:00 am**  
**Secretary of State**

04-21-2005 90237 027 \*\*\*\*61.25

<b>DOCUMENT # N04000007230</b> 1. Entity Name PRINCETON VILLAS II CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1220 E LIVINGSTON STREET ORLANDO, FL 32803			Mailing Address 1220 E LIVINGSTON STREET ORLANDO, FL 32803		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address <i>Lori Balducci</i> Suite, Apt. #, etc. <i>33 E Princeton St. Unit A</i> City & State <i>Orlando, FL</i> Zip <i>32804</i>			
Country USA		4. FEI Number 04082005 Chg-NP		CR2E037 (10/03) <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent MILLER, JORDAN 1220 E LIVINGSTON STREET ORLANDO, FL 32803			
7. Name and Address of New Registered Agent Name <i>Lori Balducci</i> Street Address (P.O. Box Number is Not Acceptable) <i>33 E. Princeton St. Unit A</i> City <i>Orlando</i>		State <i>FL</i> Zip Code <i>32804</i>			
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 <i>Lori Balducci</i> <span style="float: right;">4/18/05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May-1, 2005		9. Election Campaign Financing <input type="checkbox"/> \$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		
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	
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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: <i>Lori Balducci</i> <i>Lori Balducci</i> <span style="float: right;">4/18/05 #630-248-0750</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					