

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011375

FILED
May 01, 2006
Secretary of State

Entity Name: STARPOINTE II SERVICE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7751 KINGSPONTE PKWY
SUITE 127
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7751 KINGSPONTE PKWY
SUITE 127
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-1993162 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DUARTE, NORBERTO R
7024 LAKE WILLIS DR
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DUARTE, NORBERTO R
Address: 7751 KINGSPONTE PKWY SUITE 127
City-St-Zip: ORLANDO, FL 32819

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: RODRIGUES, MARCIO
Address: 7751 KINGSPONTE PKWY # 127
City-St-Zip: ORLANDO, FL 32819

Title: SD () Change (X) Addition
Name: BRAGA, MARIO
Address: 7751 KINGSPONTE PKWY # 127
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: NORBERTO DUARTE

PTD

05/01/2006

Electronic Signature of Signing Officer or Director

Date