

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011831

FILED  
Apr 24, 2007  
Secretary of State

**Entity Name:** FONTAINEBLEAU II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

19950 WEST COUNTRY CLUB DRIVE  
TENTH FLOOR  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

19950 WEST COUNTRY CLUB DRIVE  
TENTH FLOOR  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRAUSS, LEON  
4401 COLLINS AVE.  
MIAMI BEACH, FL 33140 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: PD ( ) Delete  
Name: COOPER, MEL  
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR  
City-St-Zip: AVENTURA, FL 33180

Title: VD ( ) Delete  
Name: REDLICH, MICHELLE  
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR  
City-St-Zip: AVENTURA, FL 33180

Title: STD ( ) Delete  
Name: KRAUS, LEON  
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: MEL COOPER

PD

04/24/2007

Electronic Signature of Signing Officer or Director

Date