
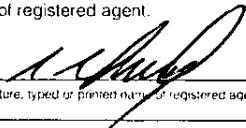
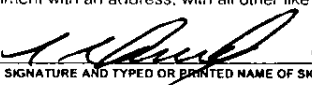


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2007 8:00 am**  
**Secretary of State**

04-20-2007 90072 039 \*\*\*\*61.25

<b>DOCUMENT # N05000000393</b> 1. Entity Name EL JARDIN II CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4380 US HWY 1 VERO BEACH, FL 32967			Mailing Address 4380 US HWY 1 SUITE 102 VERO BEACH, FL 32967		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 4380 U.S. HWY #1			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Vero Beach, FL		4. FEI Number 20-2287066	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32967		Country USA		Applied For Not Applicable	
6. Name and Address of Current Registered Agent  SPÉFCHL, CLIFFORD S JR 4380 US HWY 1 VERO BEACH, FL 32967			7. Name and Address of New Registered Agent Name Clifford S. Speechly, Jr. Street Address (P.O. Box Number is Not Acceptable) 4380 U.S. Hwy #1 City Vero Beach FL Zip Code 32967		
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  Clifford S. Speechly, Jr. 4/17/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAN JOSE, TIRSO 600 CORPORATE DRIVE #102 FORT LAUDERDALE, FL 33334	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIP Nick Tarabocchia 4380 U.S. Hwy #1 Vero Beach, FL 32967	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAN JOSE, TIRSO 600 CORPORATE DRIVE #102 FORT LAUDERDALE, FL 33334	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIV Randy Ford 4380 U.S. Hwy #1 Vero Beach, FL 32967	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALDIVIA, ALBERT 600 CORPORATE DRIVE #102 FORT LAUDERDALE, FL 33334	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S/T Diana Federer 4380 U.S. Hwy #1 Vero Beach, FL 32967	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SPEECHLY, CLIFFORD S JR 4380 US HWY 1 VERO BEACH, FL 32967	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/M/Sec. Clifford S. Speechly, Jr. 4380 U.S. Hwy #1 Vero Beach, FL 32967	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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
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
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b>  Clifford S. Speechly, Jr. 4/17/07 (772) 564-7440 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

40072133



03292007 Chg-NP CR2E037 (12/06)