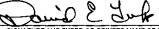
2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # N05000003530 Feb 09, 2007 08:00 AM 1. Enlity Name **Secretary of State** PARADISE LAKE VILLAS II CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 109 TAYLOR STREET STE 112 PO BOX 185 PLACIDA FL 33946 PUNTA GORDA FL 33950 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 20-2690572 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOTITZKY, EDWARD L Street Address (P O Box Number is Not Acceptable) 109 TAYLOR STREET STE 112 PUNTA GORDA FL 33950 City Z₁D Code 8. The above named only 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when redistating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS; CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delcte Change Addition THIE PTD 100 NAME LUKE, DAVID E NAMI U00000629422 02/16/07-80056-012 61.25 STREET ADDRESS STREET ADDRESS 105 GARLAND WAY CITY-S1-7IP CHY-S1-7P **ROTUNDA WEST FL 33947** Addition TITLE Delete HILL ☐ Change VSD NAME NAMI LUKE, SHARON D STREET ADDRESS STREET ADDRESS 105 GARLAND WAY CHY-SI-ZIP **ROTUNDA WEST FL 33947** CITY-ST-7/P 11111 ☐ Delete nm Change ☐ Addition NAMI LUKE, DAVID M NAMI. STREET ADORESS STREET ADDRESS 254 COUGAR WAY CITY-S1-7IP CHY-ST-74P ROTUNDA WEST FL 33947 HHE ☐ Delete □ Change Addition 11111 NAME NAMI STRUCT ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-71P ■ Addition 11111 ☐ Detele TITLE Change NAME NAME STREET ADDRESS STREET ADORESS CHY-SI-7(P CHY-ST-7/P Addition Change TITLE Delete 11111 NAME NAMI STREET ADORESS STREET ADDRESS CHY-ST-73P CITY-ST-7IP

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 eath; that I am an efficier 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:



2-7-07

941-698-1213