

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

07 SEP 12 AM 1:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N05000003763

1. Entity Name  
TERRACE II AT OSPREY COVE CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business  
10481 SIX MILE CYPRESS PARKWAY  
FT MYERS, FL 33912

Mailing Address  
10481 SIX MILE CYPRESS PARKWAY  
FT MYERS, FL 33912



2. Principal Place of Business - No P.O. Box #

12734 Kenwood Ln

3. Mailing Address

12734 Kenwood Ln

Suite, Apt. #, etc.

ste 49

Suite, Apt. #, etc.

ste 49

City & State

FT Myers FL

City & State

FT Myers, FL

Zip

33907

Country

Zip

33907

Country

07162007

Chg-NP

CR2E037 (12/06)

4. FEI Number  
20-2703803

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SHIELDS, CHRISTOPHER J  
1833 HENDRY STREET  
FT MYERS, FL 33901

7. Name and Address of New Registered Agent:

Name Tropical Isles Management Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)

12734 Kenwood Ln, ste 49

City

FT Myers

FL

Zip Code

33907

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 MARK RUDLAND CAM

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7/10/07

Amended AR Is \$61.25

865

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME SCHLIFER, ALAN  
STREET ADDRESS 8451 KINGBIRD LOOP #325  
CITY-ST-ZIP FORT MEYERS, FL 33967

TITLE D ☐ Delete  
NAME LUFT, CAROL  
STREET ADDRESS 28077 BOCCACCIO WAY  
CITY-ST-ZIP NAPLES, FL 34108

TITLE D ☐ Delete  
NAME KOZLOFF, MIKE  
STREET ADDRESS 81-SCCATOGUE AVE #42  
CITY-ST-ZIP FARMINGDALE, NY

TITLE ASM ☒ Delete  
NAME HEDRICK, CHAD  
STREET ADDRESS 12734 KENWOOD LANE #49  
CITY-ST-ZIP FORT MYERS, FL 33907

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 700109712507  
CITY-ST-ZIP 03/20/07-01048-008 \*\*\$61.25

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ASM ☐ Change ☒ Addition  
NAME MARK RUDLAND  
STREET ADDRESS 12734 Kenwood Ln, ste 49  
CITY-ST-ZIP FT Myers, FL 33907

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: MARK RUDLAND

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/10/07

(239) 357-2989