2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 16, 2007 8:00 am Secretary of State DOCUMENT # N05224 04-16-2007 90079 027 ****61.25 1. Entity Name LA MÍRADA AT BOCA POINTE CONDOMINIUM ASSOCIATION NUMBER TWO, INC. Principal Place of Business Mailing Address 40000---- PRIME MANAGEMENT GROUP, INC. PRIME MANAGEMENT GROUP, INC. 6300 PARK OF COMMERCE BLVD. 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487-8290 US BOCA RATON, FL 33487-8290 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03302007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-2680307 Applied For Not Applicable Zip Country Zip 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 SWATT, MYRON C/O PRIME MANAGEMENT GROUP, INC. Street Address (P.O. Box Number is Not Acceptable) 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487-8290 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be Filing Fee is \$61.25 Make check payable to Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition RYTER, LARRY NAME NAME STREET ADDRESS 7757 LA MIRADA DR STREET ADDRESS CITY-ST-7IP BOCA RATON, FL CITY-ST-ZIP D TITLE ☐ Delete TITLE ☐ Change Addition NAME HAMMER, ROGER NAME STREET ADDRESS 7751 LA MIRADA DRIVE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP TITLE PD ☐ Delete TITLE ☐ Change ■ Addition MASON, STEVE NAME NAME STREET ADDRESS 7737 LA MIRADA DR STREET ADDRESS BOCA RATON, FL 33433 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Date Davime Phone # ☐ Addition

☐ Change

FILED