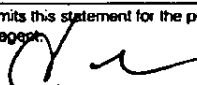
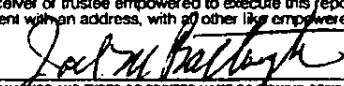


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
May 21, 2007 8:00 am
Secretary of State

04-25-2007 90194 044 ****61.25

DOCUMENT # N06000000155			
1. Entity Name THE PRESERVE AT COLONIAL SECTION II CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135		Mailing Address 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135	
2. Principal Place of Business - No P.O. Box # c/o Integrated Property Mgmt.		3. Mailing Address c/o Integrated Property Mgmt.	
Suite, Apt. #, etc. 3435 - 10th Street N., #201		Suite, Apt. #, etc. 3435 - 10th Street N., #201	
City & State Naples, FL		City & State Naples, FL	
Zip 34103	Country	Zip 34103	Country
4. FEI Number 20-3907874		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent STACKHOUSE, EDWIN D 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135		7. Name and Address of New Registered Agent Name Shields, Christopher J. Street Address (P.O. Box Number is Not Acceptable) 1833 Hendry Street PO Drawer 1507 City Ft. Myers, FL 33902 FL Zip Code	
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  DATE 3/30/07 Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when renewing)			
Filing Fee is \$61.25 Due by May 1, 2007		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 NAME STREET ADDRESS CITY - ST - ZIP	PD STACKHOUSE, EDWIN D 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135 ☒ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MEEKS, W. MICHAEL 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135 ☒ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD RAY, LAURA 9148 BONITA BCH RD., SUITE 102 BONITA SPRINGS, FL 34135 ☒ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Battaglia, Jack 9603 Hemmingway Lane, #4002 Ft. Myers, FL 33913 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Satt/McDonnell, Mark 9603 Hemmingway Lane, #4007 Ft. Myers, FL 33913 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ 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.			
SIGNATURE:  DATE 4/9/07 Daytime Phone # 5559872566 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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03232007 Chg-NP CR2E037 (12/06)