2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006825

City-St-Zip:

FILED Feb 15, 2008 Secretary of State

Entity Name: ACQUILUS II CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1201 N 1ST ST JACKSONVILLE BCH, FL 32250 **Current Mailing Address: New Mailing Address:** 1201 N 1ST ST JACKSONVILLE BCH, FL 32250 FEI Number: 20-5094267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAW OFFICES OF C GUY BOND REZNICSEK FRASER HASTINGS WHITE & SHAFFER 3010 S 3RD ST 240 PONTE VEDRA PARK DRIVE JACKSONVILLE BEACH, FL 32250 US SUITE 150 PONTE VEDRA BEACH, FL 32082 US 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. SIGNATURE: JOHN C. SAWYER, JR. 02/15/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPST () Delete (X) Change () Addition UNDERWOOD, HERBERT L JR MILES, J. III Name: Name: 1153 BEACH BLVD Address: 1201 N. 1ST STREET #301 Address: City-St-Zip: JACKSONVILLE BCH, FL 32250 City-St-Zip: JACKSONVILLE BCH, FL 32250 Title: Title: () Change (X) Addition () Delete Name: PRESTON, JOEL Name: Address: Address: 988 BIRDWOOD DRIVE City-St-Zip: City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: () Change (X) Addition WOLF, JOHN Name: Name: Address: Address: 1201 N. 1ST STREET, #203 City-St-Zip: City-St-Zip: JACKSONVILLE BEACH, FL 32250 Title: () Delete Title: DS () Change (X) Addition Name: Name: FINEGOLD, MIRIAM Address: Address: 1201 N. 1ST STREET #103 City-St-Zip: City-St-Zip: JACKSONVILLE BEACH, FL 32250 Title: () Delete Title: () Change (X) Addition BEAMER, DAVID Name: Name: 1201 N 1ST STREET #803 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

JACKSONVILLE BEACH, FL 32250

SIGNATURE: J. MILES, III P 02/15/2008