## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000009601

FILED Sep 04, 2008 Secretary of State

Entity Name: CAPE HOMES CONDOMINIUM TWO ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

13155 SW 42ND ST 550 FRONTAGE ROAD

SUITE 200 SUITE 3400

MIAMI, FL 33175 NORTHFIELD, IL 60093 US

**Current Mailing Address:** New Mailing Address:

13155 SW 42ND ST 550 FRONTAGE ROAD

SUITE 3400 SUITE 200

MIAMI, FL 33175 NORTHFIELD, IL 60093 US

FEI Number: 26-0275225 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:

KLEIN, RONALD G BUTLER, GAREY F

4340 SHERIDAN STREET FOWLER WHITE BOGGS BANKER P.A.

SUITE 102 2235 FIRST STREET

FORT MYERS, FL 33901 US HOLLYWOOD, FL 33021 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: GAREY F. BUTLER 09/04/2008 Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

SAN ROMAN, EDDIE ZEDNIK, JOE Name: Name:

13155 SW 42ND STREET, SUITE 200 Address: 550 FRONTAGE ROAD, SUITE 3400 Address: City-St-Zip: MIAMI, FL 33175 City-St-Zip: NORTHFIELD, IL 60093 US

Title: () Delete Title: (X) Change ( ) Addition RODRIGUEZ, MIGUEL Name:

Name: OYLER, JOHN Address: 12861 SW 74TH STREET Address: 9099 SPRING MOUNTAIN WAY

City-St-Zip: MIAMI, FL 33183 City-St-Zip: FORT MYERS, FL 33908 US

Title: STD () Delete Title: STD (X) Change ( ) Addition

KLEIN, RONALD G Name: OYLER, RACHEL Name:

4340 SHERIDAN STREET, SUITE 102 9099 SPRING MOUNTAIN WAY Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: FORT MYERS, FL 33908

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.

SIGNATURE: JOE ZEDNIK **PRES** 09/04/2008