

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009629

FILED
Feb 11, 2009
Secretary of State

Entity Name: JASMINE LAKES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2070 NORTH OCEAN BLVD SUITE 3
BOCA RATON, FL 33431

New Principal Place of Business:

2070 N. OCEAN BLVD
APT 3
BOCA RATON, FL 33431

Current Mailing Address:

PO BOX 4110
BOCA RATON, FL 33429

New Mailing Address:

FEI Number: 26-1527743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS, JEFF
2070 NORTH OCEAN BLVD SUITE 3
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

GIBBS, JEFF
2070 N. OCEAN BLVD
APT 3
BOCA RATON, FL 33431 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:

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEVIN, ZVI
Address: PO BOX 4110
City-St-Zip: BOCA RATON, FL 33429

Title: VD () Delete
Name: GIBBS, JEFF
Address: PO BOX 4110
City-St-Zip: BOCA RATON, FL 33429

Title: STD () Delete
Name: CONN, MICAH
Address: PO BOX 4110
City-St-Zip: BOCA RATON, FL 33429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LEVIN ZVI

PD

02/11/2009

Electronic Signature of Signing Officer or Director

Date