

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35866

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** CEDAR WOODS II ASSOCIATION, INC.

**Current Principal Place of Business:**

22441 WESTCHESTER BLVD  
PORT CHARLOTTE, FL 339808469 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 SULLIVAN ST  
STE 112  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

**FEI Number:** 65-0190552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GREENE, JOAN F  
100 SULLIVAN ST  
STE 112  
PUNTA GORDA, FL 33950 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: STD  
Name: HERMAN, ADRIAN  
Address: 21459 LANDIS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: VPD  
Name: NORTON, PAULA  
Address: 22441 WESTCHESTER BLVD 1100D  
City-St-Zip: PORT CHARLOTTE, FL 33981 US

Title: PDD  
Name: HOLOWIAK, RAIMONDO  
Address: 22441 WESTCHESTER BLVD 1100A  
City-St-Zip: CHARLOTTE HARBOR, FL 33980 US

I hereby 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 all other like empowered.

SIGNATURE: RAIMONDO HOLOWIAK

PD

02/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date