2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2005 8:00 am
Secretary of State
05-05-2005 90094 032 ****61.25

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DOCUMENT # N43169

1. Entity Name
CARMEL LAKES CONDOMINIUM NO. 2 ASSSOCIATION, INC.

Principal Place of Business	Mailing Address
% LANDMARK MANAGEMENT SERVICES 12323 S.W. 55TH STREET, STE 1002 COOPER CITY, FL 33330 US	C/O MIAMI MANAGEMENT, INC. 1189 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323 US

04262005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
LANDMARK MANAGEMENT SERVICES, INC 12323 SW 55 STREET BLDG 1000 STE 1002 COOPER CITY, FL 33330	LANDMARK MANAGEMENT SERVICES, INC 12323 SW 55 STREET BLDG 1000 STE 1002 COOPER CITY, FL 33330

FEI Number 65-0897852 ☐ Applied For ☐ Not Applicable

4. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EISINGER, DENNIS J 4000 PRESIDENTIAL CIR HOLLYWOOD, FL 33021	Name Straley & Otto, P.A. ~~Attn:~~ Street Address (P.O. Box Number is Not Acceptable) Attn: Charlie Otto 3990 Sheridan St. - Suite #109 City Hollywood FL Zip Code 33021

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 Charles Otto, Esq. for Straley & Otto, P.A. 6/13/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHERMAN, RONALD 451 NE 207 LANE #103 MIAMI, FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, DAVID 451 NE 207 LN #203 MIAMI, FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILLIAMS, ROSETTA 451 NE 207 LANE #102 MIAMI, FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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 exemption stated in Section 119.07(3)(i), 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: Randy Sampaio 4/25/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #