

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44617

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** BYLANDS COMMERCIAL CONDOMINIUM II ASSOCIATION, INC.

**Current Principal Place of Business:**

928 NE 24 LN  
UNIT 1  
CAPE CORAL, FL 33909 US

**New Principal Place of Business:**

**Current Mailing Address:**

928 NE 24 LN  
UNIT 1  
CAPE CORAL, FL 33909 US

**New Mailing Address:**

**FEI Number:** 65-0410930      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CAMERON, DON  
928 NE 24 LANE  
UNIT #1  
CAPE CORAL, FL 33909 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: D  
Name: HERRING, TOM  
Address: 928 NE 24 LANE, #3  
City-St-Zip: CAPE CORAL, FL 33909

Title: D  
Name: CAMERON, DON  
Address: 928 NE 24TH LN #1  
City-St-Zip: CAPE CORAL, FL

Title: D  
Name: HOLT, JULIAN  
Address: 928 N.E. 24TH LN. UNIT #3  
City-St-Zip: CAPE CORAL,, FL 33909

Title: D  
Name: HARPER, MICHAEL  
Address: 5305 BAYVIEW CT  
City-St-Zip: CAPE CORAL, FL 33904

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: DONCAMERON@CAMERONSBRITISHFOODS.COM

PRES

02/15/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date