2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45333

FILED Apr 23, 2009 Secretary of State

Entity Name: CALOOSA PALMS II PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 409 E COLLEGE RUSKIN, FL 33570 **Current Mailing Address: New Mailing Address:** P.O. BOX 6124 P.O. BOX 1058 SUN CITY CENTER, FL 33570 RUSKIN, FL 33575 FEI Number: 59-3113571 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: TRIMMER, KATHY 409 E COLLEGE AVE RUSKIN, FL 33375 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete (X) Change () Addition LANCE, DON LANCE, DON Name: Name: 2013 E DEL WEBB Address: 2013 E DEL WEBB Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: SUN CITY CENTER, FL 33573 Title: Title: () Delete () Change () Addition PALMER, WILLIAM Name: Name: Address: 322 CALOOSA WOODS LANE Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: Title: DS () Delete Title: (X) Change () Addition WATERS, LEIGH WATERS, LEIGH Name: Name: 315 CALOOSA WOODS LANE 315 CALOOSA WOODS LANE Address: Address: City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: SUN CITY CENTER, FL 33573 Title: () Delete Title: (X) Change () Addition Name: SALMON, DOUGLAS Name: HERTLEIN, LINDA 340 CALOOSA PALMS COURT Address: 2038 E. DEL WEBB BLVD Address: City-St-Zip: SUN CITY CENTER, FL City-St-Zip: SUN CITY CENTER, FL 33573 Title: () Delete Title: () Change (X) Addition BACKES, LAVERNE Name: Name: 2058 PRESTANCIA LANE Address: Address: City-St-Zip: City-St-Zip: SUN CITY CENTER, FL 33573 Title: () Delete Title: () Change (X) Addition CIKA, ERNEST Name: Name: Address: Address: 2026 E. DEL WEBB BLVD. SUN CITY CENTER, FL 33573 City-St-Zip: 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: DON LANCE P 04/23/2009