2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N94000001309

Entity Name: THE PALMTATION II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1004 SW 48TH TERRACE
#103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

1004 SW 48TH TERRACE
#103
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 65-0567732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOELDER, JAY
1004 SW 48TH TERRACE
UNIT #103
CAPE CORAL, FL 33914 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:	DP	( ) Delete
Name:	SADOWSKI, GENE	
Address:	3737 FALCONER KIMBALL STAND ROAD	
City-St-Zip:	FALCONER, NY 14733	
Title:	DS	( ) Delete
Name:	BREWSTER, LARRY	
Address:	1004 SW 48TH. TERRACE #102	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:	DV	( ) Delete
Name:	VITEK, TOM	
Address:	1004 SW 48TH TERRACE, #201	
City-St-Zip:	CAPE CORAL, FL 33914 US	
Title:	DT	( ) Delete
Name:	DOEDLER, JAY	
Address:	1004 SW 48TH TERRACE, #103	
City-St-Zip:	CAPE CORAL, FL 33914 US	

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:	
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: JAY DOELDER DT 02/05/2009

Electronic Signature of Signing Officer or Director — Date