

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90180 029 ****61.25

DOCUMENT # N95000005684

1. Entity Name
LAKE VISTA II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**223 HIDDEN BAY DR
OSPREY, FL 34229 US**

Mailing Address
**PROGRESSIVE MANAGEMENT
1801 GLENGARY ST
SARASOTA, FL 34231 US**

40054446



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03062006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0634914

Applied For
Not Applicable

Zip

Country

Zip

Country

5. 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

**PROGRESSIVE COMMUNITY MANAGEMENT, INC
1801 GLENGARY ST.
SARASOTA, FL 34231**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2006**

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 PD ☐ Delete
NAME LILLIBRIDGE, EDMUND
STREET ADDRESS 223 HIDDEN BAY DR #302
CITY-ST-ZIP OSPREY, FL 34229

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME SUTTON, BILL
STREET ADDRESS 1801 GLENGARY STREET
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME COOLEY, LISE
STREET ADDRESS 223 HIDDEN BAY DR #305
CITY-ST-ZIP OSPREY, FL 34229

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME PHILLIPS, HENRY
STREET ADDRESS 223 HIDDEN BAY DR. UNIT
CITY-ST-ZIP OSPREY, FL 34229

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME HANKINSON, LLOYD
STREET ADDRESS 223 HIDDEN BAY DR. #403
CITY-ST-ZIP OSPREY, FL 34229

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME MARREL, JIM
STREET ADDRESS 1801 GLENGARY STREET
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☒ Change ☐ Addition
NAME **MARKEL, Jim**
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim MARKEL 4/17/06 941-921-5393