

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004415

FILED
Mar 17, 2011
Secretary of State

Entity Name: CONDOMINIUM ASSOCIATION OF GOLF VILLAS II, INC.

Current Principal Place of Business:

10039 PERFECT DR
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0744078 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROSS, DEBORAH L ESQ
759 S FEDERAL HWY, STE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

ROSS, DEBORAH L ESQ
789 S FEDERAL HWY, STE 101
STUART, FL 34994 US

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: DEBORAH ROSS

03/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: LUPINACCI, THOMAS
Address: 9843 PERFECT DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: SD
Name: GEIGER, STEPHEN
Address: 9815 PERFECT DR
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: TD
Name: WILLIAM, CROVA
Address: 37014 GRANT ROAD
City-St-Zip: ROMULUS, MI 48174

Title: D
Name: MANDATO, MIKE
Address: 6825 TRAYMORE COURT
City-St-Zip: MENTOR, OH 44060

Title: PD
Name: MORRIS, RAYMOND
Address: 5 ANDREA DR.
City-St-Zip: NEW PALTZ, NY 12561

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: RAYMOND MORRIS

PRES

03/17/2011

Electronic Signature of Signing Officer or Director

Date