2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004478

1. Entity Name

REGENCY II OFFICE CONDOMINIUM ASSOCIATION, INC.



Feb 03, 2003 8:00 am Secretary of State

FILED

02-03-2003 90122 048 ****62.50

		1						
Principal Place of Business 3200 N WICKHAM MELBOURNE FL 32935 US		Mailing Address P.O. 80X 33503 INDIALANTIC FL 32903 US		-			11. Br B 11 A 1881 bA	4411811186
2. Principal F	Place of Business	3. Mailing Address	· -					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				HECK HERE IF MAKING		
City & State		City & State			4. FEI Number 59-3502536 Applied For			
Zip	Country	Zip	Country		5. Certificate of Sta	atus Desired	\$8.75 Add	
	6 Name and Address of Course	Doctored Acces					Fee Require	<u></u>
	6. Name and Address of Current	Registered Agent	Name		7. Name and Addr	ess of New Registered A	Agent	
IACORS	JOANN B		<u> </u>	T	~_ ~- ·-	a Carrier		
410 THRI			Street A	ddress (F	P.O. Box Number is N	ot Acceptable)		
SATELLITE BEACH FL 32937						÷ 5.		
			City			FL	Zip Cod	le
the obligat	named entity submits this statement fo tions of registered agent.	r the purpose of changing its	registered office of	registere	ed agent, or both, in t	he State of Florida. I am f	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signat	ure required	when reinstating)	DATE		
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
	· · · · · · · · · · · · · · · · · · ·	Trust Fund C	ontribution.	LJ	Added to Fees	Florida Depart	tment of	State
10.	OFFICERS AND DIF	Trust Fund C	ontribution.	A	Added to Fees DDITIONS/CHANGE	Florida Depart	RECTORS IN	State
	· · · · · · · · · · · · · · · · · · ·	Trust Fund C	ontribution.	A	Added to Fees DDITIONS/CHANGE	Florida Depart	tment of	State
10. TITLE NAME	OFFICERS AND DIF DP JACOBS, JOANN B 410 THRUSH DR.	Trust Fund C	11. TITLE	A Tran	Added to Fees DDITIONS/CHANGE	Florida Depart	RECTORS IN	State
10. TITLE NAME STREET AODRESS	OFFICERS AND DIF	Trust Fund C	11. TITLE NAME STREET ADDRESS	A Tran	Added to Fees DDITIONS/CHANGE	Florida Depart	RECTORS IN	State
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIF DP JACOBS, JOANN B 410 THRUSH DR. SATELLITE BEACH FL 32937 DV WALTERS, WAYNE	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	A Tran	Added to Fees DDITIONS/CHANGE	Florida Depart	RECTORS IN Change	State 1 10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated 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:

MIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/03 321-259-019