2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008
Secretary of State

DOCUMENT# N99000001849

Entity Name: THE VILLAS II AT LAKEMONT ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 65-0909741 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR 04/03/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DONALDSON, DAVID
Address: 13080 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33912

Title: VPD ( ) Delete
Name: JOHNSON, FRANCES
Address: 10374 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33912

Title: STD ( ) Delete
Name: COX, RICHARD
Address: 10367 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OBRIEN, AL
Address: 10360 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33966

Title: VPD (X) Change ( ) Addition
Name: STONE, KENNETH
Address: 10386 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33966

Title: TSD (X) Change ( ) Addition
Name: COX, RICHARD
Address: 10367 WHITE PALM WAY
City-St-Zip: FORT MYERS, FL 33966

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: AL OBRIEN PD 04/03/2008
Electronic Signature of Signing Officer or Director Date