2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N99000004991

Entity Name: CAMINO WOODS II HOMEOWNERS, INC.

Current Principal Place of Business:

22442 SAN MIGUEL WAY
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

22442 SAN MIGUEL WAY
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 65-0946542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOEKZEMA, RON
22442 SAN MIGUEL WAY
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

LYDAY, CHARLES E
22442 SAN MIGUEL WAY
BOCA RATON, FL 33433 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: CHARLES E LYDAY 04/28/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: KUPERSTOCK, SAUL
Address: 6215 PETALUMA DR
City-St-Zip: BOCA RATON, FL 33433

Title: PD ( ) Delete
Name: HOEKZEMA, RON
Address: 6110 PETALUMA DR.
City-St-Zip: 6010 PETALUMA DRIVE, FL 33433

Title: SD ( ) Delete
Name: HART, FRANCINE C
Address: 6169 PETALUMA DR.
City-St-Zip: BOCA RATON, FL 33433

Title: TD ( ) Delete
Name: CRANE, FREDERICK D
Address: 6191 PETALUMA DR
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete
Name: CHARBONNEAU, ROBERT
Address: 6067 PETALUMA DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Delete
Name: LYDAY, CHARLES E
Address: 6264 PETALUMA DRIVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LYDAY, CHARLES E
Address: 6264 PETALUMA DR
City-St-Zip: BOCA RATON, FL 33433

Title: VP (X) Change ( ) Addition
Name: HOEKZEMA, RON
Address: 6110 PETALUMA DR.
City-St-Zip: BOCA RATON, FL 33433

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: FRED D CRANE MR 04/28/2009
Electronic Signature of Signing Officer or Director Date