## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000068702

Entity Name: G.L. HOMES OF PALM BEACH II CORPORATION

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1600 SAWGRASS CORP PKWY STE 230	1600 SAWGRASS CORP PKWY STE 400
SUNRISE, FL 33323	SUNRISE, FL 33323

Current Mailing Address: New Mailing Address:

1600 SAWGRASS CORP PKWY 1600 SAWGRASS CORP PKWY STE 230 STE 400

SUNRISE, FL 33323 SUNRISE, FL 33323

FEI Number: 65-0953586 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HELFMAN, STEVEN M ESQ
1600 SAWGRASS CORP PKWY
STE 230
SUNRISE, FL 33323 US

HELFMAN, STEVEN M ESQ
1600 SAWGRASS CORP PKWY
STE 400
SUNRISE, FL 33323 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: 05/01/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: EZRATTI, ITZHAK Name: Name: EZRATTI, ITZHAK 1600 SAWGRASS CORP PKWY STE 230 1600 SAWGRASS CORP PKWY STE 400 Address: Address: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323 City-St-Zip: Title: **VPAS** Title: **VPAS** () Delete (X) Change ( ) Addition Name: FANT. ALAN J Name: FANT ALAN J

Address: 1600 SAWGRASS CORP PKWY STE 230 Address: 1600 SAWGRASS CORP PKWY STE 400

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

Title: VT () Delete Title: VT (X) Change () Addition Name: MENENDEZ, MARIA N Name: MENENDEZ, N. MARIA

Address: 1600 SAWGRASS CORP PKWY STE 230 Address: 1600 SAWGRASS CORP PKWY STE 400

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

Title: V () Delete Title: V (X) Change () Addition
Name: NORWALK, RICHARD M Name: NORWALK, RICHARD M

Address: 1600 SAWGRASS CORP PKWY STE 230 Address: 1600 SAWGRASS CORP PKWY STE 400

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

Title: S () Delete Title: S (X) Change () Addition

Name: CORBAN, PAUL Name: CORBAN, PAUL

Address: 1600 SAWGRASS CORP PKWY STE 230 Address: 1600 SAWGRASS CORP PKWY STE 400

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: HELFMAN, STEVEN M
Address: 1600 SAWGRASS CORP PKWY STE 230
Address: 1600 SAWGRASS CORP PKWY STE 400

 Address:
 1600 SAWGRASS CORP PKWY STE 230
 Address:
 1600 SAWGRASS COR

 City-St-Zip:
 DAVIE, FL 33323
 City-St-Zip:
 SUNRISE, FL 33323

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD M. NORWALK VP 05/01/2009