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Feb 03 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 722711 (9)  
1. Corporation Name  
GREENWAY VILLAGE SOUTH ASSOCIATION NO.2, INC.



Principal Place of Business Mailing Address  
12028 GREENWAY CIRCLE SOUTH ROYAL PALM BEACH FL 33411  
12028 GREENWAY CIRCLE SOUTH ROYAL PALM BEACH FL 33411-2856

3. Date Incorporated or Qualified 02/17/1972  
3a. Date of Last Report 04/09/1996  
4. FEI Number 59-1460992 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
AULITA, LISA  
12019 W GREENWAY DR  
SUITE 107  
ROYAL PALM BCH. FL 33411

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  
SIGNATURE Lisa Aulita LISA Aulita 1/22/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relating) DATE

12. OFFICERS AND DIRECTORS  
TITLE DT DELETED  
NAME MYERS, WALTER  
STREET ADDRESS 12021 W GREENWAY DR., #106  
CITY-ST-ZIP ROYAL PLM BCH, FL 00000  
TITLE DP DELETED  
NAME AULITA, LISA  
STREET ADDRESS 12019 W. GREENWAY DR. #107  
CITY-ST-ZIP ROYAL PLM BCH, FL 00000  
TITLE DVP DELETED  
NAME ALPERT, FLORENCE  
STREET ADDRESS 12021 W. GREENWAY DR.  
CITY-ST-ZIP ROYAL PLM BCH, FL 00000  
TITLE D DELETED  
NAME GUIDA, ANGELO  
STREET ADDRESS 12026 GREENWAY CIR. SO.  
CITY-ST-ZIP ROYAL PLM BCH FL  
TITLE D DELETED  
NAME GLIGORA, TONY  
STREET ADDRESS 12021 W. GREENWAY DR. #203  
CITY-ST-ZIP ROYAL PALM BCH. FL 33411  
TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE Change Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE Change Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE Change Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE Change Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE Change Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE Change Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
2/3 12  
600002076566  
-02/04/97--01024--052  
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14. I do 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 indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lisa Aulita LISA Aulita 1/22/97 793-4717  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0040887

CR2E037 (9/96)