


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 18, 2007 8:00 am
Secretary of State

05-18-2007 90023 045 ****61.25

DOCUMENT # 722711 1. Entity Name GREENWAY VILLAGE SOUTH ASSOCIATION NO.2, INC.			
Principal Place of Business 12028 GREENWAY CIRCLE SOUTH ROYAL PALM BEACH FL 33411		Mailing Address 12028 GREENWAY CIRCLE SOUTH ROYAL PALM BEACH FL 33411	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip - - - - Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
		4. FEI Number 59-1460992 Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75-Additional Fee Required	
6. Name and Address of Current Registered Agent AULITA, LISA 12019 W GREENWAY DR #107 ROYAL PALM BEACH FL 33411		7. Name and Address of New Registered Agent Name ANGELA GUIDA Street Address (P.O. Box Number is Not Acceptable) 12024 Greenway Cir. So. #104 City Royal Palm Beach FL Zip Code 33411	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>X Angela Guida</i> <small>Signature, typed or mailed name of registered agent and title applicable. (NOI) Registered Agent signature required when reinstating. DATE</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS; CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AULITA, LISA 12019 W. GREENWAY DR. #107 ROYAL PALM BCH. FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ISRAEL BROUWSTEIN 12024 Greenway Cir. So #104 ROYAL Palm Beach, FL 33411 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GUIDA, ANGELO 12026 GREENWAY C.R. 9 ROYAL PALM BEACH FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TOOMEY, SALLY 12024 W. GREENWAY DR. #206 ROYAL PALM BEACH FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CIARDULLO, ROSE 12022 W. GREENWAY DR. #104 ROYAL PALM BEACH FL 33411 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALBERT MAGGIO 12020 Greenway Cir. So. #202 ROYAL Palm Beach, FL 33411 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALPERT, FLORENCE 12021 GREENWAY CIR S ROYAL PALM BEACH FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated 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: *X Angela Guida*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Laytime Phone #