2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90006 035 ****61.25

DOCUMENT # 730645

1. Entity Name

NUMBER 2 CONDOMINIUM ASSOCIATION -VILLAGE GREEN,

Principal Place of Business	Mailing Address
200 VILLAGE GREEN CIRLE EAST K-322 PALM SPRINGS FL 33461	200 VILLAGE GREEN CIRLE EAST K-322 PALM SPRINGS FL 33461

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2146020 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SEACREST MGMT CO 3700 GEORGIA AVE WEST PALM BEACH FL 33405	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASTD LIBERONI, FRANK 400 VILLAGE GREEN CIRCLE PALM SPRGS FL 33461 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES D FRANK LIBERONI 400 VILLAGE GREEN CIRCLE PALM SPRINGS, FL. 33461 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, JOHN 300 VILLAGE GREEN CIR S PALM SPRINGS, FL 00000 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES D DAN MANCINI 400 VILLAGE GREEN CIRCLE PALM SPRINGS, FL. 33461 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WINER, MILTON 300 VILLAGE GREEN CIRCLE S. PALM SPRINGS, FL 00000 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC'Y. D MARY SARACINO 200 VILLAGE GREEN CIRCLE PALM SPRINGS, FL. 33461 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PROC, ANDREW 200 VILLAGE GREEN CIRCLE E PALM SRPGS FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST.SEC'Y/TREAS. D LAWRENCE YOUNG 700 VILLAGE GREEN CIRCLE PALM SPRINGS, FL. 33461 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LINDEMAN, GEORGE 300 VILLAGE GREEN CIR S PALM SPRINGS FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 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: _____ FRANK LIBERONI-PRES. 1/31/01 (561) 439-6425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)