

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 751922

FILED
Apr 15, 2003
Secretary of State

Entity Name: EAST LAKE WOODLANDS CYPRESS ESTATES CONDOMINIUM UNIT TWO ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-1988536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TINDALL, JEAN
Address: 285 CYPRESS LANE
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: HOWARTH, JUDY
Address: 295 CYPRESS LANE
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: LEVEROCK, JAMES
Address: 111 W CYPRESS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: PD () Delete
Name: WEIGAND, WALTER
Address: 119 W CYPRESS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: SD () Delete
Name: LEVEROCK, CHARLOTTE
Address: 111 W CYPRESS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: TD () Delete
Name: VANSCHAIK, PATRICIA
Address: 120 CYPRESS LANE
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HORVATH, JUDY
Address: 295 CYPRESS LANE
City-St-Zip: OLDSMAR, FL 34677

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 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 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: WALTER WEIGAND

PD

04/15/2003

Electronic Signature of Signing Officer or Director

Date

DON WALES, DIRECTOR
291 CYPRESS LANE
OLDSMAR, FL 34677

GILBERT MYERS, DIRECTOR
127 WEST CYPRESS CT
OLDSMAR, FL 34677

JOHN VANSHAIK, DIRECTOR
120 CYPRESS LANE
OLDSMAR, FL 34677