2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752776

1. Entity Name

NUMBER 2 CONDOMINIUM ASSOCIATION - PALM GREENS A T VILLA DEL RAY, INC.



FILED Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90185 036 ****61.25

Principal Plac	ice of Business		Mailing Address									
5801 VIA DELRAY			5801 VIA DELRAY				Anntotob					
DELRAY BEACH FL 33484			DELRAY BEACH FL 33484									
US			US				1 (88)() (88) (18					
2. Principal I	Place of Busine	988	3. Mail	ing Address		—						
5801 Via Delray			Same as Above							1811 81811 818		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
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City & State			City & State			4. F	4. FEI Number 59-1828941				plied For	1
Delray Beach, FL_			_							No	Not Applicable	
Zip Country 33484 US		Country	Zip		Country	- C	Costificate of Ci	etus Dosirad	\$	8.75 Add	ditional	1
						3. 0	5. Certificate of Status Desired Fee Required				d	
	6. Name a	and Address of Current I	Registere	d Agent		7. N	lame and Add	iress of New R	egistered Ag	ent]_
					Name	George B	Carto	n				
DITKOW	SKI, ALBER T	George B. Sa	xton		Street	George B. Saxton Street Address (P.O. Box Number is Not Acceptable)						
5801 VIA	DELRAY				Silect	-daress (1,0. Ec	ox redinact is i	voi Acceptable	',			1
DELRAY	BEACH FL 3	3484				5801 V1a	Delzaw	·	-		· · · · · · · · · · · · · · · · · · ·	1
							Ol Via Delray		FL		Zip Code	
					L	Delray B				3348		Ţ
	e named entity ations of registe	submits this statement for red agent	tue barbo	use of changing its re	egistered bilice c	i registered age	ant, or boun, in	the state of Fig	ilua. Laimai	illida With,	and accept	
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SIGNATURE	Heora	e 13. Dait	لبت	George	B. Saxton	, Presid	ent	Januar	ry 20/03	3		
SIGNATURE	Signature, typed o	r printed name of registered agent a	and title if appl	licable. (NOTE:	Registered Agent signa	ture required when rei	nstating)		DATE			
	-	· · · · · · · · · · · · · · · · · · ·	T					·				┧
			1	9. Election Camp	naign Einancing	¢E O	Μ	Mai	ka Check i	Pavable	to	İ
FILE NOW: FEE IS \$61.25			Trust Fund Contribu		-				te Check Payable to a Department of State			
						7			o bopain		,,,,,	
10.		OFFICERS AND DIR	RECTORS		11,	ADDITI	ONS/CHANG	ES TO OFFICE	RS AND DIRE	CTORS IN	10	1_
TITLE	PD			☐ Delete	TITLE		 -			Change	☐ Addition] &
NAME	SAXTON, G	EORGE B.			NAME	J						5037 (10/02
STREET ADDRESS	13478 A SA	ABAL PALM COURT			STREET ADDRESS							12
CITY-ST-ZIP	DELRAY BE	ACH FL 33484			CITY-ST-ZIP							18
TITLE	TD			☐ Delete	TITLE			•••		Change	☐ Addition	18
NAME	RICHTER, P	PEARL ?			NAME							10
STREET ADDRESS	13303 C PII	NEAPPLE PALM COUR	₹T		STREET ADDRESS							
CITY-ST-ZIP	DELRAY BE	ACH FL 33484			CITY-ST-ZIP							
TITLE	SD	· -		Delete	TITLE	SD				Change	K Addition	1
NAME	SILVERMAN	i, lillian		50,0,0	NAME	Turner	, Wilbur	r	_			Ĺ
STREET ADDRESS		NTRY PALM COURT			STREET ADDRESS			Palm Cou	rt			
CITY-ST-ZIP		ACH FL 33484			CITY-ST-ZIP	Delray	Beach,	FL 3348	34			ĺ
TITLE	VPD		•••	☐ Delete	TITLE	 				Change	Addition	1
NAME	HOFFMAN,	ABRAHAM		LI Deiele	NAME				·			
STREET ADDRESS		DYAL PALM COURT			STREET ADDRESS							
CITY-ST-ZIP		ACH FL 33484			CITY-ST-ZIP							
TITLE	VPD											ł
****	1850	· · · · · · · · · · · · · · · · · · ·		Colete	TITLE	<u> </u>			Г	Change	☐ Addition	ı
NAME				☐ Delete	TITLE NAME					☐ Change	☐ Addition	
NAME STREET ADDRESS	FIRESTONE		···	☐ Delete	TITLE NAME STREET ADDRESS					☐ 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

DELRAY BEACH FL 33484

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

LSIGNA SET AS O GEORGE Saxton (President)

☐ Delete

1/20/03

561-498-1051

☐ Change

☐ Addition