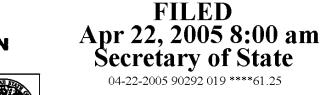
2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #766540

UNIVERSITY VILLAGE EAST CONDOMINIUMS RECREATION SUPERVISORY BOARD OF ADMINISTRATION, INC.





Principal Place of Business C/O ROYAL PROPERTY MANAGEMENT 8317 W. ATLANTIC BLVD. CORAL SPRINGS, FL 33071		Mailing Address C/O ROYAL PROPERTY MANAGEMENT 8317 W. ATLANTIC BLVD. CORAL SPRINGS, FL 33071								
2. Principal P	lace of Business	3. Mailing Address				1 (44)(8 184)(BULL BURN BURN BLEN B	DII OLBII DIBII OLDI	OLDA OLDA EM	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				04072005	Chg-NP	CR2E037	7 (10/03)	
City & State		City & State				4. FEI Numbe 65-0229		1		plied For t Applicable
Zip	Country	Zip	Cour			5. Certificate	of Status Desired		8.75 Add	litional
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
ROYAL PROPERTY MANAGEMENT.				Name						
8317 W. A	TLANTIC BLVD. PRINGS, FL 33071					ess (P.O. Box Number is Not Acceptable)				
				City					7:n Cod	
				City				FL	Zip Cod	e#
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										
Filing Fee is \$61.25 9. Election Campaign Fi Due by May 1, 2005 Trust Fund Contribution						\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10. OFFICERS AND DIRECTORS 11.					- + ` · A		ANGES TO OFFIC	ERS AND DIRI	ECTORS IN	10 ·
TITLE .	VP DONALD	Detete C				3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	F		Change	☐ Addition
			NAM STRE	E Et address						
CITY-ST-ZIP				-ST-ZIP						
TITLE	D	☐ Delete	tmu	E					☐ Change	☐ Addition
NAME CONCER ADDRESS			NAM							
STREET ADDRESS CITY-ST-ZIP	•			ET ADORESS - ST-ZIP						
TITLE	PD	□ Delete	TITLE		 				☐ Change	Addition
NAME	MOORE, ROBERT		NAM							
STREET ADDRESS CITY-ST-ZIP	2774 SOUTH UNIVERSITY DR.,	#10-C		ET ADDRESS						
TITLE	DAVIE, FL 33328	. ₩		-ST-ZIP					☐ Change	Addition
NAME	BEADLE, EUGENE	- Delete -	⊶ TITLE NAM		TD		Γ.		- Criange	Tag Apprilian
STREET ADDRESS	•		STRE	ET ADDRESS	2700	McDonagh. Jones 2700 S. Liniumsity Dr. #3B				
CITY-ST-ZIP	DAVIE, FL 33328		CITY	- ST- ZIP	Dav	ieiFL	33328			
TITLE NAME		☐ Delete	TITLE						☐ Change	☐ Addition
STREET ADDRESS			NAM STRE	et adoress						
CITY-ST-ZIP				-ST-ZIP						
TITLE		☐ Delete	TITLE	:	 				☐ Change	Addition
NAME			NAM	_						
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -St-zip						
ļ <u> </u>	ertify that the information symplied with	this filing does not qualify for	_1		ted in Sec	ction 119 07/3\/) Florida Statuter	I further certif	fu that the ii	oformation

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 eath; 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: .

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-757-9292

Date