

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766540

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** UNIVERSITY VILLAGE EAST CONDOMINIUMS RECREATION SUPERVISORY BOARD OF  
ADMINISTRATION, INC.

**Current Principal Place of Business:**

C/O HOLLYWOOD ACCOUNTING  
901 S STATE RD 7 SUITE 358  
HOLLYWOOD, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HOLLYWOOD ACCOUNTING  
901 S STATE RD 7 SUITE 358  
HOLLYWOOD, FL 33023

**New Mailing Address:**

**FEI Number:** 65-0229862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOLLYWOOD ACCOUNTING  
901 S STATE RD 7  
SUITE 358  
HOLLYWOOD, FL 33023 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: VP  
Name: PLAYER, DONALD  
Address: 2724 S. UNIVERSITY DR., #14C  
City-St-Zip: DAVIE, FL 33328

Title: PTS  
Name: SFETCU, VICKY  
Address: 2700 SOUTH UNIVERSITY DR 1B  
City-St-Zip: DAVIE, FL 33328

Title: D  
Name: MESTER, JAMES  
Address: 2774 S UNIVERSITY DR 10B  
City-St-Zip: DAVIE, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: VICKY SFETCU

P

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date