

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 771169

FILED
Apr 08, 2002 8:00 AM
Secretary of State

Entity Name: BRYN MAWR AT COUNTRYSIDE II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2753 ST. RD. 580, SUITE 207
CLEARWATER, FL 33761 US

New Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

Current Mailing Address:

2753 ST. RD. 580, SUITE 207
CLEARWATER, FL 33761 US

New Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

FEI Number: 59-2295061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN, C
2753 ST. RD. 580, SUITE 207
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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

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: MAUREEN C. REARDON

04/08/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LINDEMAN, RAYMOND,
Address: 2709 COUNTRYSIDE BLVD H108
City-St-Zip: CLEARWATER, FL 33761

Title: VD () Delete
Name: POLYSCHUK, CAROL
Address: 2725 COUNTRYSIDE BLVD. #D101
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: WETHERWAX, GEORGE
Address: 2705 COUNTRYSIDE BLVD. #I107
City-St-Zip: CLEARWATER, FL 33761

Title: TD () Delete
Name: ROSS, DAVID
Address: 103 WATEREDGE COURT
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAYMOND LINDEMAN

PD

04/08/2002

Electronic Signature of Signing Officer or Director

Date