2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#771169

FILED Apr 15, 2003 Secretary of State

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

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US					
Current Mailing Address:			New Mailing Address:		
4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US					
FEI Number: 59-2295061 FEI Number Applied For ()		El Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and	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:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	LINDEMAN, RAY 2709 COUNTRY CLEARWATER, VD () POLYSCHUK, C 2725 COUNTRY CLEARWATER, SD () WETHERWAX,	SIDE BLVD H108 FL 33761 Delete AROL SIDE BLVD. #D101 FL 33761 Delete GEORGE SIDE BLVD. #I107	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD (X) Change () Addition POLYSCHUK, CAROL 2725 COUNTRYSIDE BLVD D-101 CLEARWATER, FL 33761 STD (X) Change () Addition KAY, MARY 2705 COUNTRYSIDE BLVD. #E106 CLEARWATER, FL 33761 D (X) Change () Addition HALLADAY, DAVID 2717 COUNTRYSIDE BLVD. #E104 CLEARWATER, FL 33761	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	ROSS, DAVID 103 WATEREDO SAFETY HARBO		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	D (X) Change () Addition STOLTZE, SARAH 2725 COUNTRYSIDE BLVD. D-102 CLEARWATER, FL 33761 D () Change (X) Addition KIRAKAJ, TONIN 2713 COUNTRYSIDE BLVD. G-101 CLEARWATER, FL 33761	

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: CAROL POLYSCHUK PD 04/15/2003