

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90075 026 ****61.25

DOCUMENT # N12909

1. Entity Name

GREENBRIAR TWO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2780 N FLORIDA AVENUE
 SUITE #3
 HERNANDO FL 34442
 US

PO BOX 113
 HOLDER FL 34445-0113
 US

2. Principal Place of Business

3. Mailing Address

1481 N. Lombard

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LECANTO, FL.

4. FEI Number

59-2582473

Applied For

Not Applicable

Zip

Country

Zip

Country

34461

U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIGNEY, JOSEPH
 1481 N LOMBARDO LN
 1
 LECANTO FL 34461

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME STERIN, GLORIA
 STREET ADDRESS 651 E HARTFORD ST
 CITY-ST-ZIP HERNANDO FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP Delete
 NAME STAPLES, DAVID
 STREET ADDRESS 810 E GILCHRIST CT
 CITY-ST-ZIP HERNANDO FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME NAGY, D EMBETH
 STREET ADDRESS 771 E HARTFORD STREET
 CITY-ST-ZIP INVERNESS FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S Delete
 NAME TALLARIDA, PRIMO J
 STREET ADDRESS 681 E HARTFORD ST 33 110
 CITY-ST-ZIP HERNANDO FL 34442

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME SETTIMIO, JOHN
 STREET ADDRESS 790 E GILCHRIST ST 2731A
 CITY-ST-ZIP HERNANDO FL 34442

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

Glenn Sterin
REQUIRE
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/20/00

CR2E037 (9/99)