## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N12909

1. Entity Name

GREENBRIAR TWO CONDOMINIUM ASSOCIATION, INC.

## **FILED** Feb 27, 2003 8:00 am Secretary of State 02-27-2003 90149 013 \*\*\*\*70.00

Principal Place of Busine	ess	Mailing Address								
791 E. HARTFORD ST		791 E. HARTFORD ST								
#2B		#2B								
HERNANDO FL 34442 US		HERNANDO FL 34442 US				(   CA(HA)				
2. Principal Place of Bus	siness	3. Mailing Address								
						1 (60)(30) 36) (	LESA SIBIN SAULI ODSIG IOIL DIDIS G	ON BEDIT DEDIT ON	)	
Suite, Apt. #, etc.	-	Suite, Apt. #, etc.				CHÉCK HERE IF MAKING CHANGES				
City & State		City & State			4	4. FEI Number 59-2582473 Applied For Not Applicable				
Zip	Country	Zip Country			5	5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Nam	e and Address of Current R	legistered Agent			<del> </del>	. Name and Add	dress of New Registered			
		<u> </u>		Name	· · · · · · ·	T THAIN CON A A CO	areas of new riegistered	Agent		
RIGNEY, JOSEPH			ĺ	Ctook	Add (D.O.	D 11 1 1				
1481 N LOMBARDO	) LN	Street Address			Address (P.O.	(P.O. Box Number is Not Acceptable)				
LECANTO FL 3446	1				7,0	******			7	
			}	City	<del></del>			Zip Cod		
	<del> </del>			•			FI	<b>-</b> i	İ	
8.1 The above named entities the obligations of regis	ity submits this statement for stered 20en	the purpose of changing its r	egistere	d office o	or registered a	agent, or both, in	the State of Florida. I am	familiar with,	and accept	
		/_								
SIGNATURE	al/W/ K	e di au							Ì	
Signature, type	printed name of registered agent an	d title if applicable. (NOTE:	Registered	Agent signal	iture required when	n reinstating)	DATE			
		<del>/</del>								
FX F NOV	V: FEE IS \$61.25	9. Election Cam	paign Fi	nancing	\$5	5.00 May Be	Make Chec	k Pavable	to	
<u> </u>	7. 1 LE 10 001.E0	Trust Fund Co	ontributio	on.		ded to Fees	Florida Depar			
10.	OFFICERS AND DIRE	COTORS	<b>.</b>							
TITLE PD	OF ICERS AND DIRE	Delete	11.	-			ES TO OFFICERS AND D			
1	RICHARD M	Delete	NAME	P-P	GERA	E Hant	PAYNE P.d ford St Unil	Change Change	Addition	
	ARTFORD ST., UNIT 5A			T ADDRESS						
CITY-ST-ZIP HERNANI	OO FL 34442		CITY-	ST-ZIP	<i>HERI</i>	NANCIO	FLA 3444			
TITLE SD		Delete	TITLE	VP-D	GloR	in Steri	N VP-4 Rd St 34-2B	Change	Addition	
NAME SMITH, M		·	NAME		651E	HARTFOR	rdst 34.2B	-	}'	
	ARTFORD 4-B			T ADDRESS	HERN	JANdo	FL			
	00 FL 34442	T /	CITY-:				1444	-		
TITLE ATD NAME KNOWLES	S, NORMAN	Delete		5~D"	PATRI	icin Boi	uLES Sol	Change	→ Addition ·	
	LCHRIST CT.		NAME STREE	T ADDRESS	791E	HARTFO	RdS+ 21-4	ક		
000 E. GI	00 FL 34442		CITY-S				L 344491			
TITLE VD	70 12 0112	5 Delete					abush, Td :	Thomas	Addition	
NAME WHEELER	R, JOHN		NAME	1.50				□ Onange	Audition	
STREET ADDRESS 1728 N. E	NSIGN PT		STREET	ADDRESS	1/300	or 1468	~ <del>5/~~</del> ~			
CITY-ST-ZIP HERNAND	O FL 34442		CITY-S	T-ZIP	HERN	ANUA F	34442			
TITLE D		Delete	TITLE	DIE!	Ep. ch	DA-IM	CONIEY d	change	Addition	
NAME WILSON,		•	NAME	ľ	HCI	= 44 +4	ford St 5	.A		
	ARTFORD 2-B			ADDRESS						
TILITANIAL	00 FL 34442		CITY-S	1-ZIP	HER	NANdo	FL 34445	<u> </u>		
NAME		Delete	TITLE		•			☐ Change	☐ Addition	
STREET ADDRESS			NAME STREET	ADDRESS						
CITY-ST-ZIP			CITY-S							
12. I hereby certify that the	e information supplied with th	is filing does not qualify for the	ne exem	ption stat	ted in Section	119.07(3)(i). Flo	vida Statutes I further cer	tify that the in	formation	

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. GERALdINE M. PAYNE 2-3503 352746605