

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

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90590 001 \*\*\*630.00

**DOCUMENT # 723535**

1. Entity Name  
**POINCIANA VILLAGE TWO ASSOCIATION, INC.**



Principal Place of Business

**401 WALNUT ST  
KISSIMMEE FL 34759  
US**

Mailing Address

**401 WALNUT ST  
KISSIMMEE FL 34759  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-7352003**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**BROWN, ROCKELL Y  
401 EAST WALNUT  
KISSIMMEE FL 34759**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	REISMAN, JOHN	
STREET ADDRESS	401 WALNUT STREET	
CITY-ST-ZIP	KISSIMMEE FL 34759	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GULLO, VINCE	
STREET ADDRESS	401 WALNUT STREET	
CITY-ST-ZIP	KISSIMMEE FL 34759	
TITLE	STD	<input type="checkbox"/> Delete
NAME	KNIZNER, DAVID	
STREET ADDRESS	401 E WALNUT	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	COUCH, DAVID E	
STREET ADDRESS	401 WALNUT ST.	
CITY-ST-ZIP	KISSIMMEE FL 34759	
TITLE	D	<input type="checkbox"/> Delete
NAME	MITCHELL, STEPHEN J	
STREET ADDRESS	401 WALNUT STREET	
CITY-ST-ZIP	KISSIMMEE FL 34759	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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, or other like empowered.

SIGNATURE: **DAVID E. COUCH**

4/10/03

(407)846-1311

CR2E037 (10/02)