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

FILED
Feb 21, 2003 8:00 am
Secretary of State
02-21-2003 90149 039 ****61.25

DOCUMENT # 718537

1. Entity Name
TOWNSITE APARTMENTS II, INC.

Principal Place of Business	Mailing Address
122 S. LAKESIDE DRIVE % RAYMOND LIBERATORE LAKE WORTH FL 33460	122 S. LAKESIDE DRIVE % RAYMOND LIBERATORE LAKE WORTH FL 33460

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
122 S. Lakeside Drive	P. O. Box 6228
Suite, Apt. #, etc. c/o Dean Irwin	Suite, Apt. #, etc.
City & State Lake Worth, FL 33460	City & State Lake Worth, FL 33466
Zip: 33460 Country: Palm Beach	Zip: 33466 Country: Palm Beach

4. FEI Number 59-1323681 ☐ Applied For ☐ Not Applicable

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
LIBERATORE, RAYMOND 122 S. LAKESIDE DR. #4A LAKE WORTH FL 33460	Name: Carol Masterson Street Address (P.O. Box Number is Not Acceptable): 421 S. Lakeside Drive; #2 City: Lake Worth FL Zip Code: 33460

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: Carol Masterson 2/15/03
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D SERAFINO, CROCE 1290 OLD MEADOW RD 5-B PITTSBURGH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/S IRWIN, DEAN 122 S. LAKESIDE 1-A LAKE WORTH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST LIBERATORE, ANGELINE 122 S. LAKESIDE #4A LAKE WORTH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D IRWIN, MARGRET 122 S. LAKESIDE DR APT 1-A LAKE WORTH FL 33460	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Carol Masterson 421 S. Lakeside Drive Lake Worth, FL 33460	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Angela Francisco c/o Libertore 122 C. Lakeside Drive Lake Worth, FL 33460	☐ Change ☒ Addition

CR2E037 (10/02)

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: Carol Masterson REQUIRED 2-6-03