2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# 718631

Entity Name: GARDENS OF BEACON SQUARE CONDOMINIUM NUMBER TWO, INCORPORATED

Current Principal Place of Business:

2189 CLEVELAND STREET
SUITE 225
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

2189 CLEVELAND STREET
SUITE 225
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-1633185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD
2189 CLEVELAND STREET
SUITE 225
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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:

Title: SD ( ) Delete
Name: GRUMBACH, DEBORAH
Address: 4221 TOUCHTON PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD ( ) Delete
Name: POTTINGER, IRENE
Address: 4241 SHELDON PLACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: EISNER, JULIUS
Address: 4214 REDCLIFF PLACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: CLEARLY, MICHAEL
Address: 4230 REDCLIFF PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VPD ( ) Delete
Name: RIZOR, CARLYNN I
Address: 4210 REDCLIFF PLACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: PD (X) Delete
Name: CICCONE, JOAN
Address: 4254 SHELDON PL
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: BROWN, JOY
Address: 4231 SHELDON PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: PD (X) Change ( ) Addition
Name: CLEARY, MICHAEL
Address: 4230 REDCLIFF PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VPD (X) Change ( ) Addition
Name: GANDARA, ELMA
Address: 4226 REDCLIFF PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change ( ) Addition
Name: STOREY, ELIZABETH
Address: 4241 REDCLIFF PL
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change ( ) Addition
Name: RIZOR, CARLYNN I
Address: 4210 REDCLIFF PLACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL CLEARY P 01/30/2009

Electronic Signature of Signing Officer or Director — Date