

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719601

FILED
Apr 01, 2009
Secretary of State

Entity Name: MANOR GROVE VILLAGE TWO, INC.

Current Principal Place of Business:

119 NE 19 CT
WILTON MANORS, FL 33309

New Principal Place of Business:

Current Mailing Address:

PROPERTY MANAGEMENT PARTNERS, INC.
7300 W MCNAB RD, STE 220
TAMARAC, FL 33321

New Mailing Address:

PROPERTY MANAGEMENT PARTNERS, INC.
7116 W MCNAB RD,
TAMARAC, FL 33321

FEI Number: 59-1389455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALANCY, STEVEN S P.A.
311 SE 13 ST
FT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT PARTNERS
7116 W MCNAB RD.
TAMARAC, FL 33321 US

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: MARYANN PRINCIPATO - VP

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: ALLMAN, WANDA
Address: 1415 NE 17TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: P () Delete
Name: CUSTER, CONSTANCE
Address: 119 NE 19 CT
City-St-Zip: WILTON MANORS, FL 33309

Title: S () Delete
Name: CAGNE, ROBERT
Address: 119 NE 19 CT
City-St-Zip: WILTON MANORS, FL 33309

Title: T () Delete
Name: RUBIN, MARTIN
Address: 9400 NW 16 ST
City-St-Zip: PLANTATION, FL 33322

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CANOSA, JAMES
Address: 119 NE 19TH COURT
City-St-Zip: WILTON MANORS, FL 33305

Title: T (X) Change () Addition
Name: CUSTER, CONSTANCE
Address: 119 NE 19 CT
City-St-Zip: WILTON MANORS, FL 33305

Title: S (X) Change () Addition
Name: GAGNE, ROBERT
Address: 119 NE 19 CT
City-St-Zip: WILTON MANORS, FL 33305

Title: P (X) Change () Addition
Name: RUBIN, MARTIN
Address: 9400 NW 16 ST
City-St-Zip: PLANTATION, FL 33322

Title: D () Change (X) Addition
Name: MAXWELL, BRUCE
Address: 1940 NE 1ST TERRACE
City-St-Zip: WILTON MANORS, FL 33305

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: MARTIN RUBIN

PRES

04/01/2009

Electronic Signature of Signing Officer or Director

Date