


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90058 050 ****61.25

DOCUMENT # 723740

1. Entity Name
 THE TOWNHOUSES AT NOVA CONDOMINIUM, INC., NO. 2



Principal Place of Business
 3680 SW 59 TERR.
 DAVIE, FL 33314

Mailing Address
 3680 SW 59 TERR.
 DAVIE, FL 33314

40001000



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

04022008 Chg-NP CR2E037 (12/06)

4. FEI Number
 59-1585467

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOND, GRACE
 3680 SW 59 TERR
 DAVIE, FL 33314

7. Name and Address of New Registered Agent

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 Grace Bond DATE 4/2/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE:

Filing Fee is \$61.25 Due by May 1, 2008

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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	MURPHY, DOROTHY	5795 ORANGE DR	DAVIE, FL 33314	<input type="checkbox"/>
VD	ARGENTI-DEAL, CHRISTINE	3660 SW 59 TERR	DAVIE, FL 33314	<input checked="" type="checkbox"/>
TD	BOND, GRACE	3680 SW 59 TERR	DAVIE, FL	<input type="checkbox"/>
SD	BOND, GRACE	3650 SW 59 TERR	DAVIE, FL 33314	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<u>same</u>			<input type="checkbox"/>	<input type="checkbox"/>
VD	Farina, Tim	3754 S.W. 59 Terr	DAVIE, FL. 33314	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<u>same</u>			<input type="checkbox"/>	<input type="checkbox"/>
	<u>same</u>			<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Grace Bond DATE 4/2/08 954-587-2341

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #