

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90126 001 *****8.75
 09-17-2001 90126 002 *****61.25

DOCUMENT # 727071

1. Entity Name

UNIVERSITY MANORS CONDOMINIUM NUMBER TWO, INC.

Principal Place of Business

2050 N.W. 81ST AVE., #222
 PEMBROKE PINES FL 33024

Mailing Address

2050 N.W. 81ST AVE., #222
 PEMBROKE PINES FL 33024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1518540**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

TERRELL, TY
2050 NW 81ST AVE
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

Name **Rosemary Terrell**
 Street Address (P.O. Box Number is Not Acceptable)
2050 NW 81 Ave Apt. 222
Pembroke Pines **FL** Zip Code **33024**

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.

SIGNATURE **Rosemary Terrell** **Rosemary Terrell** **9-6-01**
 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
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	KATHERINE TRYKOWSKI	
STREET ADDRESS	2050 NW 81 AVE., #225	
CITY-ST-ZIP	PEMBROKE PINES, FL 00000	
TITLE	V	☐ Delete
NAME	BEAUDIN, JEANNINE	
STREET ADDRESS	2050 NW 81 AVE #228	
CITY-ST-ZIP	PEMBROKE PINES, FL 00000	
TITLE	D	☒ Delete
NAME	GIANNINI, PAUL	
STREET ADDRESS	2050 NW 81ST AVENUE 221	
CITY-ST-ZIP	PEMBROKE PINES FL	
TITLE	PT	☐ Delete
NAME	DI IACONE, MARIAN	
STREET ADDRESS	2050 NW 81ST AVE, #224	
CITY-ST-ZIP	PEMBROKE PINES FL	
TITLE	D	☐ Delete
NAME	LUCY POLITO	
STREET ADDRESS	2050 NW 81ST AVE #229	
CITY-ST-ZIP	PEMBROKE PINES FL 33024	
TITLE	S	☐ Delete
NAME	GAIL PIVNICK	
STREET ADDRESS	2050 NW 81ST AVE ##126	
CITY-ST-ZIP	PEMBROKE PINES FL 33024	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Gil Amara	
STREET ADDRESS	2050 NW 81 Ave Apt 227	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DS	☒ Change ☐ Addition
NAME	Lucy Polito	
STREET ADDRESS	2050 NW 81 Ave	
CITY-ST-ZIP	Pembroke Pines, FL 33024	
TITLE		☐ Change ☐ 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, with all other like empowered.

SIGNATURE: **Marian Di Iacone** **Marian Di Iacone** **9-6-01**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

CR2E037 (5/01)