2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 16, 2007 8:00 am Secretary of State **DOCUMENT #727071** 04-16-2007 90333 034 ****61.25 UNIVERSITY MANORS CONDOMINIUM NUMBER TWO, INC. Principal Place of Business Mailing Address 2050 N.W. 81 AVE. 2050 N.W. 81 AVE. **APT 230 APT 230** PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1518540 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DENNIS TAVARES DEROSE, DIANA Street Address (P.O. Box Number is Not Acceptable) 2050 NW 81 AVE. #230 2050 NW 81 AVE # 230 PEMBROKE PINES, FL 33024 CityPEMBROKE PINES 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. I am familiar with, and accept the obligations of registered agent. DENNIS TAVANES SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Addition JEANNINE BEAUDINE DI IACONE, MARIAN NAME NAME 2050 NW 81 ANS # 228 2050 NW 81ST AVE, #224 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES, FL PEMBRALE PINES 33024 Addition ☐ Change TITLE ☐ Delete TITLE LUCY POLITO NAME NAME DENNIS TAVARES 2050 NW SI AVE # 226 STREET ADDRESS 2050 NW 81ST AVE #229 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PEMBROKE PINES, FL 33024 PEMBROKE PINES PL 33024 AT/S/D TITLE Delete TITLE **☑** Change ■ Addition LUCY POLITO 2050 NU 86 AV6 # 219 NAME GOMEZ, CATHERINE NAME STREET ADDRESS 2050 NW 81ST AVE SUITE 219 STREET ADDRESS PEMBRAILE PINES AL PEMBROKE PINES, FL 33024 CITY-ST-7IP CITY-ST-7IP ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. 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 it 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 attach

SIGNATURE AND TYPED OR PRINTED NAME OF