

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727071

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** UNIVERSITY MANORS CONDOMINIUM NUMBER TWO, INC.

**Current Principal Place of Business:**

2050 N.W. 81 AVE.  
APT 230  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

2050 N.W. 81 AVE.  
APT 230  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

**FEI Number:** 59-1518540      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BREAUX, DON  
10200 W STATE RD 84 STE 216  
DAVIE, FL 33324 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: DIR  
Name: PALACIO, GUADALUPE  
Address: 2050 NW 81 AVE #219  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP  
Name: POLITO, LUCY  
Address: 2050 NW 81ST AVE #229  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ST  
Name: CLARK, THOMAS  
Address: 2050 NW 81 AVE #218  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: P  
Name: PALACIO, DENIS  
Address: 2050 NW 81 AVE #225  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D  
Name: GONZALES, VICTOR  
Address: 2050 NW 81 AVE #213  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: DENIS PALACIO

PRES

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date