

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90122 026 ****61.25

DOCUMENT # 730780

1. Entity Name

**GREENSWARD VILLAGE TWO CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

501 GREENSWARD LANE
C-101
DELRAY BEACH FL 33445
US

Mailing Address

C/O MANAGEMENT ASSIST
2626 E. COMMERCIAL BLVD #4
FORT LAUDERDALE FL 33308
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

C-201

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

Zip

Country

Zip

Country

4. FEI Number

59-1577816

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MANAGEMENT ASSIST INC
2626 E. COMMERCIAL BLVD
FORT LAUDERDALE FL 33308**

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

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
Due By May 1, 2006**

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 **VD** ☒ Delete
NAME **ANDERSON, GORDON V**
STREET ADDRESS **501 GREENSWARD LANE #C 101**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **PD** ☐ Delete
NAME **HOVELSON, ROBERT**
STREET ADDRESS **14800 MINNEHAHA PL**
CITY-ST-ZIP **WAYZATA MN 55391**

TITLE **STD** ☒ Delete
NAME **GORDON, H. JON**
STREET ADDRESS **1100 ROUTE 134**
CITY-ST-ZIP **SOUTH DENNIS MA 02660**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SVD** ☐ Change ☒ Addition
NAME **WHALEN, EDUARD**
STREET ADDRESS **907 FOX POINT CIRCLE**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **V ASST SECY** ☒ Change ☐ Addition
NAME **GORDON V. ANDERSON**
STREET ADDRESS **501 GREENSWARD LANE #C101**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **ASST TREASURER** ☒ Change ☒ Addition
NAME **RICHARD SISKIND**
STREET ADDRESS
CITY-ST-ZIP

TITLE **STD** ☒ Change ☐ Addition
NAME **GORDON, H. JON**
STREET ADDRESS **1100 ROUTE 134**
CITY-ST-ZIP **SOUTH DENNIS MA 02660**

TITLE **ASST TREASURER** ☒ Change ☒ Addition
NAME **SISKIND, RICHARD**
STREET ADDRESS **870 LAKE DRIVE**
CITY-ST-ZIP **BORLINGTON FL 33432**

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 exemptions contained in Section 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: ROBERT V. HOVELSON

FEB. 16, 2006

952-955-6488