

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741175

FILED
Apr 30, 2007
Secretary of State

Entity Name: WESTVIEW CONDOMINIUM ASSOCIATION NO. TWO, INC.

Current Principal Place of Business:

1516 N.W. 90TH WAY
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

1516 N.W. 90TH WAY
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 59-1906743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAVSS, JAMES M MANAGER
20314 N E 2ND AVE
MIAMI GARDENS, FL 33179 US

Name and Address of New Registered Agent:

STRALEY & OTTO, PA
2699 STIRLING ROAD
C-207
FT. LAUDERDALE, FL 33312 US

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: CHARLES OTTO

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: ELLIOT, CAROL
Address: 9070 TAFT ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DVP () Delete
Name: BOYD, CLAYTON
Address: 1518 NW 90 WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DS () Delete
Name: BRANNAN, CONSTANCE
Address: 1526 N W 90TH WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DP () Delete
Name: LUZ, MURRILLO
Address: 9002 NW 14 CT
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: FREIBERG, LINDA
Address: 1535 N W 90TH WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BOYD, CLAYTON
Address: 1518 NW 90 WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LUZ, MURRILLO
Address: 9002 NW 14 CT
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DVP (X) Change () Addition
Name: FREIBERG, LINDA
Address: 1535 N W 90TH WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DP () Change (X) Addition
Name: LEVENSON, ADELE
Address: 12000 S. AVIARY DRIVE
City-St-Zip: COOPER CITY, FL 33026 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ADELE LEVENSON

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date