

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741199

FILED
Apr 14, 2011
Secretary of State

Entity Name: UNIVERSITY VILLAGE EAST CONDOMINIUM II ASSOCIATION, INC.

Current Principal Place of Business:

WEST BROWARD COMMUNITY MANAGEMENT
820 SOUTH STATE ROAD 7
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

WEST BROWARD COMMUNITY MANAGEMENT
820 SOUTH STATE ROAD 7
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 59-2090080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST BROWARD COMMUNITY MANAGEMENT
820 SOUTH STATE ROAD 7
PLANTATION, FL 33317 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: PD
Name: LEDER, BRUCE
Address: 2768 S. UNIVERSITY DR. 12-A
City-St-Zip: DAVIE, FL 33328

Title: VPD
Name: MESTER, SHARON
Address: 2774 S UNIVERSITY DR 10B
City-St-Zip: DAVIE, FL 33328

Title: S
Name: COVILI, MICHAEL
Address: 2708 S. UNIVERSITY DRIVE 11-D
City-St-Zip: DAVIE, FL 33328

Title: D
Name: CLINE, RONNIE
Address: 2762 S UNIVERSITY DR #9D
City-St-Zip: DAVIE, FL 33328

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: BRUCE LEDER

P

04/14/2011

Electronic Signature of Signing Officer or Director

Date