

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746519

FILED
Jan 31, 2012
Secretary of State

Entity Name: BARCLEY ESTATES CONDOMINIUM NO. 2 ASSOCIATION, INC.

Current Principal Place of Business:

8750 DR MLKING ST N
ST PETERSBURG, FL 33702 US

New Principal Place of Business:

8780 DR MLKING ST N
ST PETERSBURG, FL 33702 US

Current Mailing Address:

19535 GULF BLVD
SUITE E
INDIAN SHORES, FL 33785 US

New Mailing Address:

PO BOX 56088
ST. PETERSBURG, FL 33732 US

FEI Number: 59-2028363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DVORAK, JEFFREY S
19535 GULF BLVD
SUITE E
INDIAN SHORES, FL 33785 US

Name and Address of New Registered Agent:

THOMAS, MATHEW
8780 9TH ST N
ST. PETERSBURG, FL 33702 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: MATHEW THOMAS

01/31/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: THOMAS, MATHEW
Address: 8780 9TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: T
Name: YOUNG, ANN T
Address: 8700 9TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: S
Name: GOMEZ, LINDA S
Address: 8720 9TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: HECHANOVA, RAMON M
Address: 8830 9TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: PEREZ, VITALIA
Address: 8730 9TH ST N
City-St-Zip: ST. PETERSBURG, FL 33702

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: SCOTT DVORAK

LCAM

01/31/2012

Electronic Signature of Signing Officer or Director

Date