

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053107

FILED
Sep 14, 2006
Secretary of State

Entity Name: UNIVERSAL REALTY GROUP OF FLORIDA TWO, LLC

Current Principal Place of Business:

3170 NORTH FEDERAL HIGHWAY
100A
LIGHT HOUSE POINT, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

3170 NORTH FEDERAL HIGHWAY
100A
LIGHT HOUSE POINT, FL 33064 US

New Mailing Address:

FEI Number: 20-1774428 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PERILLO, WILLIAM
3170 NORTH FEDERAL HIGHWAY
100A
LIGHT HOUSE POINT, FL 33064 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: MAURER, KATHERIN
Address: 3170 NORTH FEDERAL HIGHWAY SUITE 100A
City-St-Zip: LIGHT HOUSE POINT, FL 33064 US

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

Title: MGR () Delete
Name: VARRICCHIO, ROBERT
Address: 3170 NORTH FEDERAL HIGHWAY SUITE 100A
City-St-Zip: LIGHT HOUSE POINT, FL 33064 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM PERRILLO

MGR

09/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date