2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000007116

Entity Name: JULIANA VILLAGE 2A CONDOMINIUM ASSOCIATION, INC.

Apr 07, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT 265 AIRPORT ROAD SOUTH NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

C/O R&P PROPERTY MANAGEMENT 265 AIRPORT ROAD SOUTH NAPLES, FL 34104

FEI Number: 59-3689767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

R&P PROPERTY MANAGEMENT 265 AIRPORT ROAD S NAPLES, FL 34104

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MANGANO, JOHN SCARDACCIONE, EDWARD Name: Name: 28341 S TAMIAMI TR, STE 4 Address: 4730 SHINNECOCK HILLS CT# 102 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: NAPLES, FL 34112

(X) Change () Addition Title: VD () Delete Title:

Name: WEBER, ED Name: BIBBEE, HERBERT

Address: 28341 S TAMIAMI TR. STE 4 Address: 4720 SHINNECOCK HILLS CT# 102

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: STD (X) Change () Addition REINERT, RALPH E Name: WILLENBOR, MELVIN Name:

28341 S TAMIAMI TR, STE 4 4720 SHINNECOCK HILLS CT. #101 Address: Address:

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD SCARDACCIONE PD 04/07/2003