2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000000578

Apr 25, 2003 Secretary of State

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

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: 59-3689764 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 SOUTH 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 HENNING, TED G HENNING, TED G Name: Name: Address: 4759 SHINNECOOCK HILLS CT. #101 Address: 4759 SHINNECOOCK HILLS CT. #101 City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: (X) Change () Addition Name: ALDINGER, GARY Name: ALDINGER, GARY Address: 4755 SHINNECOCK HILLS CT. #102 Address: 4755 SHINNECOCK HILLS CT. #102 City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: () Change () Addition SIMON, ROBERT Name: Name: 4740 SHINNECOCK HILLS CT. #102 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MULLER, JOHN Name: 4745 SHINNECOCK HILLS CT. #101 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:

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: GARY ALDINGER P 04/25/2003