

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000350

FILED
Apr 25, 2003
Secretary of State

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

Current Principal Place of Business:

28341 S. TAMiami TRAIL
SUITE 4
BONITA SPRINGS, FL 34134

New Principal Place of Business:

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

Current Mailing Address:

28341 S. TAMiami TRAIL
SUITE 4
BONITA SPRINGS, FL 34134

New Mailing Address:

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

FEI Number: 02-0557562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHIASON, MARION P
ONE TAMPA CITY CENTER
SUITE 2100
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: GLENN CARROLL

04/25/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANGANO, JOHN
Address: 28341 S. TAMiami TRAIL, SUITE 4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD () Delete
Name: WEBER, ED
Address: 28341 S. TAMiami TRAIL, SUITE 4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD () Delete
Name: REINERT, RALPH E
Address: 28341 S. TAMiami TRAIL, SUITE 4
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CURNAN, PETE
Address: 4805 SHINNECOCK HILLS CT#102
City-St-Zip: NAPLES, FL 34114

Title: VD (X) Change () Addition
Name: ZAJACK, DONALD
Address: 4800N SHINNECOCK HILLS CT#101
City-St-Zip: NAPLES, FL 34114

Title: SD (X) Change () Addition
Name: GALANTE, LOUIS
Address: 4825 SHINNECOCK HILLS CT#202
City-St-Zip: NAPLES, FL 34114

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: PETE CURNAN

PD

04/25/2003

Electronic Signature of Signing Officer or Director

Date