

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

03-10-2003 90744 024 \*\*\*\*6125  
FILE NO5706

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N05706

1. Entity Name

ROYAL GRENIADIER II CONDOMINIUM, INC.



Principal Place of Business

10191 W. SAMPLE ROAD, SUITE 203  
CORAL SPRINGS FL 33065

Mailing Address

10191 W. SAMPLE ROAD, SUITE 203  
CORAL SPRINGS FL 33065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2804084

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BAKALAR, SUSAN P. P.A.  
2240 SW 70TH AVENUE, UNIT D  
DAVE FL 33317

7. Name and Address of New Registered Agent

Name

James Caldwell

Street Address (P.O. Box Number is Not Acceptable)

40 S.W. Property Mgmt Inc

10191 W. Sample Rd Suite 203

City

Coral Springs

FL

Zip Code

33065

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/3/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
LERER, DAVID  
9649 RIVERSIDE DRIVE  
CORAL SPRINGS FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
POLLACK, JAMIE  
9665 RIVERSIDE DR, 12  
CORAL SPRINGS FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
CROWE, MELISSA  
9625 RIVERSIDE DR D4  
POMPANO BEACH FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SHER, LESTER  
9665 RIVERSIDE DRIVE  
CORAL SPRINGS FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
SLOVACK, NANCY  
9649 RIVERSIDE DRIVE  
CORAL SPRINGS FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
[Signature]  
[Signature]

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
JOAN ANUZZI  
9665 RIVERSIDE DR  
CORAL SPR FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
O  
URGULA COATOLI  
9665 RIVERSIDE DR  
CORAL SPR FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #