

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 14, 2009**  
**Secretary of State**

DOCUMENT# N28374

**Entity Name:** MEDITERRANEAN VILLAGE CONDOMINIUM NO.TWO ASSOCIATION, INC.**Current Principal Place of Business:**3700 ISLAND BLVD  
OFFICE  
AVENTURA, FL 33160 US**New Principal Place of Business:****Current Mailing Address:**3700 ISLAND BLVD  
OFFICE  
AVENTURA, FL 33160 US**New Mailing Address:****FEI Number:** 65-0093317      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GLAZER, ERIC ESQ  
3113 STIRLING ROAD SUITE #201  
HOLLYWOOD, FL 33312 US**Name and Address of New Registered Agent:**REED, CHRISTOPHER ESQ  
20801 BISCAYNE BLVD  
4TH FLOOR  
AVENTURA, FL 33180 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: CHRISTOPHER REED, ESQ.

07/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** P ( ) Delete  
**Name:** WARD, JIM  
**Address:** 3500 ISLAND BLVD D102  
**City-St-Zip:** AVENTURA, FL 33160**Title:** VP ( ) Delete  
**Name:** ZAMIN, RUDOLF  
**Address:** 3700 ISLAND BLVD C102  
**City-St-Zip:** AVENTURA, FL 33160**Title:** S ( ) Delete  
**Name:** BLACK, SHIRLEY  
**Address:** 3700 ISLAND BLVD C301  
**City-St-Zip:** AVENTURA, FL 33160**Title:** T ( ) Delete  
**Name:** GROSS, LAWRENCE  
**Address:** 3700 ISLAND BLVD. CPH2  
**City-St-Zip:** AVENTURA, FL 33160**Title:** D ( ) Delete  
**Name:** FELDER, WILMA  
**Address:** 3500 ISLAND BLVD D101  
**City-St-Zip:** AVENTURA, FL 33160**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JIM WARD

PRES

07/14/2009

Electronic Signature of Signing Officer or Director

Date