2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# N94000002826

Entity Name: THE FOUNTAINVIEW CLUB NO. 2 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2825 GRANADA BLVD.
UNIT 2-A
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2825 GRANADA BLVD.
UNIT 2-A
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-6064793 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHEL, PETER L
2396 N E 172ND STREET
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: COSCULLUELA, MARIA E
Address: 2825 GRANADA BLVD 2A
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete
Name: ARANGO, RUBEN C
Address: 2825 GRANADA BLVD 2B
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: O'MALLEY, MARY P
Address: 2825 GRANADA BLVD 1B
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: BUCH, ERNESTO
Address: 2825 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: MIYARES, HEBE B
Address: 2825 GRANADA BLVD 3A
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: GONZALES, MARIA T
Address: 2825 GRANADA BLVD 3B
City-St-Zip: CORAL GABLES, FL 33134

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:

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: MARIA COSCULLUELA PRES 03/01/2009

Electronic Signature of Signing Officer or Director — Date