

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

**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90120 045 \*\*\*\*61.25

**DOCUMENT # N94000002826**

1. Entity Name

**THE FOUNTAINVIEW CLUB NO. 2 CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**2825 GRANADA BLVD.  
UNIT 1-A  
CORAL GABLES FL 33134**

Mailing Address

**2825 GRANADA BLVD.  
UNIT 1-A  
CORAL GABLES FL 33134**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6064793**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DEL VALLE, FRANCISCO L  
2825 GRANADA BLVD  
UNIT 1-A  
CORAL GABLES FL 33134**

Name

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

City

**FL**

Zip Code

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)

DATE

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Delete
NAME	COSCULLUELA, MARIA E	
STREET ADDRESS	2825 GRANADA BLVD 2A	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	ARANGO, RUBEN C	
STREET ADDRESS	2825 GRANADA BLVD 2B	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DAWES, WILLIAM	
STREET ADDRESS	2825 GRANADA BLVD 3B	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	COX, CHARLOTTE	
STREET ADDRESS	2825 GRANADA BLVD 1B	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	DEL VALLE, FRANCISCO L	
STREET ADDRESS	2825 GRANADA BLVD 1A	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SOLIS, BEATRIZ	
STREET ADDRESS	2825 GRANADA BLVD 3A	
CITY-ST-ZIP	CORAL GABLES FL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 live empowered.

SIGNATURE: Francisco L. Del Valle President April 7, 2003 305-447-1673

CR2E037 (10/02)