## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765415** 

Entity Name: SOUTH RIVER VILLAGE TWO CONDOMINIUM ASSOCIATION,

INC.

**FILED** Apr 17, 2015 **Secretary of State** CC4217972148

## **Current Principal Place of Business:**

30 SW SOUTH RIVER DRIVE STUART, FL 34997

## **Current Mailing Address:**

30 SW SOUTH RIVER DRIVE STUART, FL 34997 US

FEI Number: 59-2214170 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ROSS, DEBORAH L ESQ ROSS EARLE & BONAN, P.A. 789 S FEDERAL HWY STE 101 STUART, FL 34994 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title

Name MILLMAN, ERROLL Name THOMAS, SALLY

361 SW SOUTH RIVER DRIVE #203 270 SW SOUTH RIVER DR. #202 Address Address

City-State-Zip: STUART FL 34997 City-State-Zip: STUART FL 34997

Title **SECRETARY** Title **TREASURER** Name HILL. ALAN Name LIEGEOT, MARY

Address 301 S.W. SOUTH RIVER DRIVE 270 SW SOUTH RIVER DRIVE # 106 Address

102 City-State-Zip: STUART FL 34997

City-State-Zip: STUART FL 34997

ASST. SECRETARY Title Name ISAZA, DEBRA

Address 361 S.W. SOUTH RIVER DRIVE

102

City-State-Zip: STUART FL 34997

I hereby 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 all other like empowered.

SIGNATURE: SALLY THOMAS

Electronic Signature of Signing Officer/Director Detail

VICE PRESIDENT

04/17/2015 Date