## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 765415** 

Entity Name: SOUTH RIVER VILLAGE TWO CONDOMINIUM ASSOCIATION,

INC.

FILED
Mar 21, 2013
Secretary of State
CC1400471798

## **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:

BECKER & POLIAKOFF 625 N. FLAGLER DRIVE WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P/D Title VP/D

Name THOMAS, SALLY Name MILLMAN, ERROL

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

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

Title S/D Title T/D

Name HILL, ALAN Name LIEGEOT, MARY

Address 301 SW SOUTH RIVER DRIVE # 102 Address 270 SW SOUTH RIVER DRIVE, # 106

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

Title AS/D

Name JENKS, ALDRO

Address 300 SW SOUTH RIVER DRIVE 102

City-State-Zip: STUART FL 34997

SIGNATURE: SALLY THOMAS

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/21/2013

Date