

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 23, 2011  
Secretary of State**

DOCUMENT# 723532

Entity Name: POINCIANA VILLAGE FIVE ASSOCIATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

401 WALNUT STREET  
POINCIANA, FL 34759 US

**Current Mailing Address:**

**New Mailing Address:**

401 WALNUT STREET  
POINCIANA, FL 34759 US

FEI Number: 23-8352006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BROWN, ROCKELL Y  
401 WALNUT STREET  
POINCIANA, FL 34759 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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ZERILLO, REMIGIA  
Address: 401 WALNUT ST  
City-St-Zip: POINCIANA, FL 34759

Title: VPD  
Name: ALVAREZ, JARIBEL  
Address: 401 WALNUT STREET  
City-St-Zip: POINCIANA, FL 34759

Title: STD  
Name: MITCHUM, JEFFREY S  
Address: 401 WALNUT ST  
City-St-Zip: POINCIANA, FL 34759

Title: D  
Name: IORIO., ANTHONY S JR.  
Address: 401 WALNUT STREET  
City-St-Zip: POINCIANA, FL 34759

Title: D  
Name: DESTREMPS, VICTOR  
Address: 401 WALNUT STREET  
City-St-Zip: POINCIANA, FL 34759

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: ALVAREZ, JARIBEL

VPD

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date