2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Jul 07, 2005 8:00 am
Secretary of State
07-07-2005 90008 010 ****61.25

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07022005 Chg-NP CR2E037 (10/03)

DOCUMENT # 728794

1. Entity Name
CAYMAN CAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4307 GULF DR. #101 BRADENTON BEACH, FL 34217	P.O. BOX 262 BRADENTON BEACH, FL 34217

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: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EARLY, JANE
4307 GULF DR.
C/O #101
BRADENTON BEACH, FL 34217

7. Name and Address of New Registered Agent

Name: Timothy R. PEREZ
Street Address (P.O. Box Number is Not Acceptable): 4307 GULF DR. # 201
City: Holmes BEACH FL Zip Code: 34217

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] Timothy R. PEREZ 7-3-05

Filing Fee is $61.25
Due by September 7, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PEREZ, TIM 4307 GULF DR., #201 BRADENTON BEACH, FL 34217	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MCDONALD, TERRY 72 FAIR CASTLE LANE PALM COAST, FL 32137	☑ Delete	VICE PRESIDENT DR. JOE CIOFFI 415 WOOD ST, ELLWOOD City, PA 16117	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD EARLY, JANE 4307 GULF DR., #101 BRADENTON BEACH, FL 34217	☑ Delete		☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LAROSA, MICHAEL 3614 EAST CLARK CIRCLE TAMPA, FL 33629	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 like empowered.

SIGNATURE: [signature] Timothy R. PEREZ 7-3-05 (941) 778-7572
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #