

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738967

FILED
Jan 17, 2011
Secretary of State

Entity Name: VILLAS AT NEWFOUND HARBOR PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

110 S. WALTER CT.
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

P O BOX 541794
MERRITT ISLAND, FL 329541794 US

New Mailing Address:

FEI Number: 59-2369218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYMAN, BETTY S
110 S. WALTER CT.
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

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: HESTAD, ARNE K
Address: 165 S WALTER CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VD
Name: BOWERS, DORIS
Address: 110 S KENNETH CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: S
Name: HAYMAN, BETTY
Address: 110 S WALTER CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD
Name: FERRI, LEANN
Address: 140 S WALTER CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D
Name: MOSELEY, PRATT
Address: 115 S KENNETH CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D
Name: ARMBRUSTER, BRIAN C
Address: 105 S SUZANNE CT
City-St-Zip: MERRITT ISLAND, FL 32952

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: BETTY S HAYMAN

S

01/17/2011

Electronic Signature of Signing Officer or Director

Date