

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741058

FILED
Apr 16, 2010
Secretary of State

Entity Name: VILLA BOUF CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

107 CLAREMONT LN.
PALM BEACH SHORES, FL 33404

New Principal Place of Business:

107 CLAREMONT LN.
#3
PALM BEACH SHORES, FL 33404

Current Mailing Address:

107 CLAREMONT LN.
UNIT #4 SCOTT
PALM BEACH SHORES, FL 33404

New Mailing Address:

107 CLAREMONT LN.
#3
PALM BEACH SHORES, FL 33404

FEI Number: 59-1887302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, SCOTT
2288 WINDSOR RD
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

DIMITROFF, PATRICIA MRS.
107 CLAREMONT LANE
#3
PALM BEACH SHORES, FL 33404 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: PATRICIA DIMITROFF

04/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: DIMITROFF, LAMBRO DR.
Address: 107 CLAREMONT LANE #3
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: TSD
Name: DIMITROFF, PATRICIA MRS.
Address: 107 CLAREMONT LANE, 3
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: D
Name: TCHOKRES, TOMKA-DOROTHY MRS.
Address: 107 CLAREMONT LANE, #2
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: PD
Name: VASILOVSKY, ALEX
Address: 107 CLAREMONT LANE #1
City-St-Zip: PALM BEACH SHORES, FL 33404

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: PATRICIA DIMITROFF

TSD

04/16/2010

Electronic Signature of Signing Officer or Director

Date