## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 747188** 

FILED Apr 09, 2012 Secretary of State

Entity Name: VILLA YVONNE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

C/O C. ALLEN PROPERTIES C/O RESORT MANAGEMENT 2685 HORSESHOE DR S. #215 3050 N. HORSESHOE DR. #172 NAPLES, FL 34104

NAPLES, FL 34104

**Current Mailing Address:** 

**New Mailing Address:** 

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S. #215 NAPLES, FL 34104

C/O C. ALLEN PROPERTIES 3050 N. HORSESHOE DR. #172

NAPLES, FL 34104

FEI Number: 59-2313292

FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NEWCOME, THOMAS 229 7TH AVE S. #203 NAPLES, FL 34102

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:**

T/S

SERCU, STEVE Name: Address: 31 N. MAIN ST

City-St-Zip: PITTSFORD, NY 14534

Title:

Name: NEWCOME, THOMAS Address: 229 7TH AVE S UNIT 203 City-St-Zip: NAPLES, FL 34102

Title: VΡ

CAMUTI, MARGARET Name: Address: 229 7TH AVE, S. UNIT 102 City-St-Zip: NAPLES, FL 34102

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: THOMAS NEWCOME

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04/09/2012