

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762237

FILED
Apr 26, 2006
Secretary of State

Entity Name: MARBRISA VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVE
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

8009 S ORANGE AVE
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-2369311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FURLOW, REBECCA
C/O LELAND MGT, INC
8009 S ORANGE AVE
ORLANDO, FL 32809 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: D () Delete
Name: LEVESQUE, ROBERT MR
Address: 22 W MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: DVP () Delete
Name: JENNINGS, MARGARET MS
Address: 38 W MARBRISA WAY
City-St-Zip: KISSIMMEE, FL

Title: VP () Delete
Name: QUATRONE, JUDITH
Address: 39 W MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: T () Delete
Name: LEBRON, CARMEN
Address: 61 S MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete
Name: CICCHILLO, DOMINIC
Address: 9 WEST MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: D (X) Delete
Name: NEGRON, MICHAEL
Address: 97 E MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: QUATRONE, JUDITH
Address: 39 WEST MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: VP (X) Change () Addition
Name: LEBRON, CARMEN C
Address: 61 SOUTH MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: S (X) Change () Addition
Name: SAROSY, THOMAS J
Address: 51 WEST MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: T (X) Change () Addition
Name: MARCELINO, CAMELIA A
Address: 99 EAST MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: D (X) Change () Addition
Name: NEGRON, MICHAEL A
Address: 97 EAST MARBRISA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUDITH QUATRONE

P

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date