

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765972

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: VILLAS OF NORTHDALE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

16105 N FLORIDA  
SUITE A  
LUTZ, FL 33549 US

**New Principal Place of Business:**

**Current Mailing Address:**

16105 N FLORIDA  
SUITE A  
LUTZ, FL 33549 US

**New Mailing Address:**

FEI Number: 59-2302534      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MEZER, STEVEN  
1801 N. HIGHLAND AVE  
TAMPA, FL 33602 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 ( ) Delete  
Name: MANSFIELD, RUSSELL  
Address: 16105 N FLORIDA #A  
City-St-Zip: LUTZ, FL 33549

Title: VPD ( ) Delete  
Name: DALTON, D J  
Address: 16105 N FLORIDA #A  
City-St-Zip: LUTZ, FL 33549

Title: STD ( ) Delete  
Name: BORDWELL, SANDY  
Address: 16105 N FLORIDA #A  
City-St-Zip: LUTZ, FL 33549

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TD (X) Change ( ) Addition  
Name: DALTON, D J  
Address: 16105 N FLORIDA #A  
City-St-Zip: LUTZ, FL 33549

Title: SD (X) Change ( ) Addition  
Name: FLORENCE, GEORGE  
Address: 16105 N FLORIDA #A  
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify 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: RUSSELL MANSFIELD

PRES

03/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date