

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 02, 2011
Secretary of State**

DOCUMENT# 766668

Entity Name: VILLAGE SQUARE OF TITUSVILLE, CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1870 KNOX MCRAE DR.
SUITE 201
TITUSVILLE, FL 32780**New Principal Place of Business:**1685-1795 HARRISON ST.
TITUSVILLE, FL 32780**Current Mailing Address:**P.O. BOX 15
TITUSVILLE, FL 32781**New Mailing Address:**C/O RECONCILABLE DIFFERENCES, INC
109 LONG POINT ROAD
CAPE CANAVERAL, FL 32920

FEI Number: 59-2350781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:HEMISPHERE ISLAND PROPERTIES MANAGEMENT
1870 KNOX MCRAE DR.
SUITE 201
TITUSVILLE, FL 32780 US**Name and Address of New Registered Agent:**RECONCILABLE DIFFERENCES, INC.
109 LONG POINT ROAD
CAPE CANAVERAL, FL 32920 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: MICHELLE DAVIS-DUGAN

06/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD
Name: BOURKE, EVELYN
Address: 1725 HARRISON ST. #124
City-St-Zip: TITUSVILLE, FL 32780Title: TD
Name: MCDOWELL, DORIS
Address: 1755 HARRISON ST. # 129
City-St-Zip: TITUSVILLE, FL 32780Title: SD
Name: COLVIN, MARIA
Address: 1685 HARRISON ST. #156
City-St-Zip: TITUSVILLE, FL 32780Title: D
Name: GOSNELL, ELIZABETH
Address: 1795 HARRISON ST. #214
City-St-Zip: TITUSVILLE, FL 32780Title: VPD
Name: GROE, VERNON
Address: 1715 HARRISON ST. # 138
City-St-Zip: TITUSVILLE, FL 32780

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: EVELYN BOURKE

PD

06/02/2011

Electronic Signature of Signing Officer or Director

Date