

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Apr 25, 2011
Secretary of State**

DOCUMENT# 767939

Entity Name: HOMEOWNERS OF PORT CHARLOTTE VILLAGE, INC.**Current Principal Place of Business:**1000 KINGS HWY #300
PORT CHARLOTTE, FL 33980**New Principal Place of Business:****Current Mailing Address:**1000 KINGS HWY #300
PORT CHARLOTTE, FL 33980**New Mailing Address:**

FEI Number: 59-2283369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:WOTITZKY, EDWARD L
223 TAYLOR ST.
PUNTA GORDA, FL 33950 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: PRES
Name: GRESKO, SHARON
Address: 1000 KINGS HWY. # 372
City-St-Zip: PORT CHARLOTTE, FL 33980Title: VP
Name: ROWLEY, RAYMOND
Address: 1000 KINGS HWY. #469
City-St-Zip: PORT CHARLOTTE, FL 33980Title: SEC
Name: KOSKELA, LINDA
Address: 1000 KINGS HWY. # 490
City-St-Zip: PORT CHARLOTTE, FL 33980Title: TRES
Name: KELLY, GEORGE
Address: 1000 KINGS HWY. #222
City-St-Zip: PORT CHARLOTTE, FL 33980Title: DIR
Name: BRYANT, WILLIAM K
Address: 1000 KINGS HWY. #444
City-St-Zip: PORT CHARLOTTE, FL 33980Title: DIR
Name: WASHBURN, BETTY LOU
Address: 1000 KINGS HWY. # 186
City-St-Zip: PORT CHARLOTTE, FL 33980

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: SHARON GRESKO

PRES

04/25/2011

Electronic Signature of Signing Officer or Director

Date