2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769767

FILED Apr 04, 2006 Secretary of State

Entity Name: VILLAS DEL SOL HOMEOWNERS ASSOCIATION, INC.

Current P	rincipal Place of	Business:	New Principal Place	of Business:
	RMONT ROAD ORDA, FL 33982	US		
Current M	ailing Address:		New Mailing Addres	ss:
	RMONT ROAD ORDA, FL 33982	US		
FEI Number:	59-1501038	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cur	rent Registered Agent:	Name and Address	of New Registered Agent:
28200 BEF	Y, JOAN J PMGF RMONT RD. DRDA, FL 33982			
The above	named entity sub	mits this statement for the	ournose of changing its registere	ed office or registered agent, or both,
	of Florida.		ourpose of offuriging its registere	ed office of registered agent, or both,
n the State	e of Florida.	Anno the statement of the		su office of registered agent, or both,
n the State	e of Florida. * RE:	Signature of Registered Ag		Date
in the State	e of Florida. * RE:	Signature of Registered Ag	ent	
n the State SIGNATUF OFFICER: Title: Name: Address:	e of Florida. RE: Electronic	Signature of Registered Ag PRS: elete J PMGR RD	ent	Date
in the State SIGNATUF OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electronic S AND DIRECTO PMGR () De DEPLONTY, JOAN 28200 BERMONT	Signature of Registered Ag PRS: Plete J PMGR RD L 33982 Plete FD RD	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
in the State	E of Florida. RE: Electronic B AND DIRECTO PMGR () De DEPLONTY, JOAN 28200 BERMONT PUNTA GORDA, FI TD () De OLSON, DAVID A 1 28200 BERMONT	Signature of Registered Ag PRS: Elete J PMGR RD L 33982 Elete FD RD L 33982	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition

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: RONALD J. OLSON S 04/04/2006