2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 03, 2006 8:00 am Secretary of State **DOCUMENT #770871** 05-03-2006 90222 049 ****61.25 VILLAGE DRIVE OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 40 FOREST RD 40 FOREST RD P O BOX 1946 P 0 BOX 1946 FLAGLER BEACH, FL 32136-4405 US FLAGLER BEACH, FL 32136-4405 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Numbe 59-2859414 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>Bellapianta, Marc</u> KING, CHARLES V Street Address (P.O. Box Number is Not Acceptable) 54 VILLAGE DR. FLAGLER BEACH, FL 32136 17 Old Kings Rd.N. Suite B Palm Coast 8. 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. I am familiar with, and accept the obligations of regis MARC BELLAPIANTA ACCOPETT MANAGE SIGNATURE 9. Election Campaign Financing Make check payable to \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE SD ☐ Delete TITLE ☐ Change ☐ Addition KAPCZYNSKI, LORRAINE NAME NAME 44 SEA VISTA DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32137 CITY-ST-ZIP Addition VD VD Change XI Delete TITLE TITLE NAME KING, CHARLES V NAME Morgan, Linda 2260 S.Flagler Ave. Flagler Beach, FL 32136 STREET ADDRESS 51 VILLAGE DR STREET ADDRESS CITY-ST-7IP FLAGLER BEACH, FL 32138 CITY-ST-ZIP PCD ☐ Change Addition ☐ Delete TILE TITLE PETOK, CHRISTINE NAME STREET ADDRESS STREET ADDRESS 55 VILLAGE DRIVE CITY-ST-ZIP CITY-ST-ZIP FLAGLER BEACH, FL 32136 ☐ Delete TITLE ☐ Change ☐ Addition BADER, CAROL NAME NAME STREET ADDRESS **26 ROXANNE LANE** STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32164 CITY-ST-ZIF ☐ Delete ☐ Change ☐ Addition TITLE KAPCZYNSKI, JOSEPH NAME 44 SEA VISTA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32137 CITY-ST-ZIF Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered CHRISTING PETOX 4/17/06

FILED