

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001069

FILED
Jan 10, 2012
Secretary of State

Entity Name: THE VILLAS AT ASTON GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SOUTHWEST PROPERTY MGMT CORP
1044 CASTELLO DR #206
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

SOUTHWEST PROPERTY MGMT CORP
1044 CASTELLO DR #206
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-3700655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MGMT CORP.
1044 CASTELLO DRIVE #206
NAPLES, FL 34103 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: VP
Name: BILL, HERBST
Address: 4795 ASTON GARDENS WAY, #D101
City-St-Zip: NAPLES, FL 34109

Title: D
Name: WINN, PHILIP
Address: 4815 ASTON GARDENS WAY, #B201
City-St-Zip: NAPLES, FL 34109

Title: S
Name: HAUBER, WANDA
Address: 4805 ASTON GARDENS WAY #101A
City-St-Zip: NAPLES, FL 34109

Title: T
Name: COOPER, BILL
Address: 4825 ASTON GARDENS WAY, #A201
City-St-Zip: NAPLES, FL 34109

Title: P
Name: SEGALL, RALPH
Address: 4795 ASTON GARDENS WAY, #101A
City-St-Zip: NAPLES, FL 34109

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: RALPH SEGALL

P

01/10/2012

Electronic Signature of Signing Officer or Director

Date