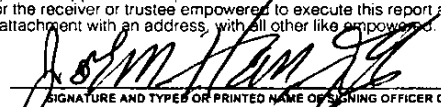


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90083 021 ****61.25

DOCUMENT # N02000009398 1. Entity Name MONDOVI BAY VILLAS MASTER ASSOCIATION, INC.			
Principal Place of Business PO BOX 380758 MURDOCK, FL 33938		Mailing Address PO BOX 380758 MURDOCK, FL 33938	
2. Principal Place of Business - No P.O. Box # 3500 Mondovi Ct		3. Mailing Address 6025 Taylor Rd Suite, Apt. #, etc. # 2	
City & State Punta Gorda, FL		City & State Punta Gorda, FL	
Zip 33955		Zip 33950	
Country USA		Country USA	
6. Name and Address of Current Registered Agent WISHARD, KRISTINE 23081 HARBOR VIEW RD PORT CHARLOTTE, FL 33980		7. Name and Address of New Registered Agent Star Hospitality Management 6025 Taylor Rd # 2 Punta Gorda FL 33950	
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 registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BOFF, JOSEPH D 942 N COLLIER BLVD MARCO ISLAND, FL 34145	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.T. John Hanzek 3500 Mondovi Ct # 1011 Punta Gorda, FL 33955
☒ Delete		☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OYER, STEVEN D 942 N COLLIER BLVD MARCO ISLAND, FL 34145	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Charles Cobis 3500 Mondovi Ct # 1022 Punta Gorda, FL 33955
☒ Delete		☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STANLEY, JACK F 2660 AIRPORT ROAD SOUTH NAPLES, FL 34112	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Joanne Buchner 3500 Mondovi Ct # 412 Punta Gorda, FL 33955
☒ Delete		☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President James Aweck 3500 Mondovi Ct # 611 Punta Gorda, FL 33955
☐ Delete		☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President William Stanwyck 3604 Tripoli Blvd Punta Gorda, FL 33955
☐ Delete		☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing 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 empowerment.			
SIGNATURE: 			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date _____ Daytime Phone # _____	

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