

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004950

FILED
Mar 14, 2005
Secretary of State

Entity Name: VILLAS OF MATANZAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

608 MATANZAS
TAMPA, FL 33609

New Principal Place of Business:

608 S. MATANZAS AVE
TAMPA, FL 33609

Current Mailing Address:

3001 EXECUTIVE DR.
STE 260
CLEARWATER, FL 33762

New Mailing Address:

608 S. MATANZAS AVE
UNIT #1
TAMPA, FL 33609

FEI Number: 20-1022569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR.
STE 260
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

LEKARCZYK, LISA A
608 S. MATANZAS AVE
UNIT #1
TAMPA, FL 33609 US

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: LISA LEKARCZYK

03/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRAFT, JEFF
Address: 3009 BARCELONA ST, STE B
City-St-Zip: TAMPA, FL 33629

Title: STD () Delete
Name: LANDERS, JAMES F
Address: 3009 BARCELONA ST, STE B
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: HUDSON, ALAN
Address: 3009 BARCELONA ST, STE B
City-St-Zip: TAMPA, FL 33629

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCKENNA, CHRIS
Address: 608 S. MATANZAS AVE UNIT #5
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Change () Addition
Name: BITTNER, TRAVIS
Address: 608 S. MATANZAS AVE UNIT #3
City-St-Zip: TAMPA, FL 33609

Title: SEC (X) Change () Addition
Name: LEKARCZYK, MARTIN J
Address: 608 S. MATANZAS AVE UNIT #1
City-St-Zip: TAMPA, FL 33609

Title: TRES () Change (X) Addition
Name: LEKARCZYK, MARTIN J
Address: 608 S. MATANZAS AVE UNIT #1
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARTIN J LEKARCZYK

SEC

03/14/2005

Electronic Signature of Signing Officer or Director

Date