## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004950

FILED Feb 11, 2007 Secretary of State

Entity Name: VILLAS OF MATANZAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

608 S. MATANZAS AVE TAMPA, FL 33609

**Current Mailing Address: New Mailing Address:** 

608 S. MATANZAS AVE 608 S. MATANZAS AVE UNIT #1 UNIT #5 TAMPA, FL 33609 TAMPA, FL 33609

FEI Number: 20-1022569 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LEKARCZYK, LISA A TERRY, MIKE 608 S. MATANZAS AVE 608 S. MATANZAS AVE UNIT #1 UNIT #5 TAMPA, FL 33609 US 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: MIKE TERRY 02/11/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete (X) Change ( ) Addition

VILLAS OF MATANZAS H, OA - PENDING E L ECTION TERRY, MIKE Name: Name: 608 S. MATANZAS AVE UNIT #1 Address: 608 S. MATANZAS AVE UNIT #5 Address:

City-St-Zip: TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33609

Title: ( ) Delete Title: () Change () Addition

BITTNER, TRAVIS Name: Name: Address: 608 S. MATANZAS AVE UNIT #3 Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change ( ) Addition LEKARCZYK, MARTIN J VILLAS OF MATANZAS -, PENDING ELECT I ON Name: Name:

608 S. MATANZAS AVE UNIT #1 608 S. MATANZAS AVE UNIT #5 Address:

Address:

City-St-Zip: TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33609

( ) Delete Title: **TRES** Title: **TRES** (X) Change ( ) Addition

LEKARCZYK, MARTIN J VILLAS OF MATANZAS -, PENDING ELECT I ON Name: Name:

608 S. MATANZAS AVE UNIT #1 608 S. MATANZAS AVE UNIT #5 Address: Address:

TAMPA, FL 33609 City-St-Zip: 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 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: MIKE TERRY **PRES** 02/11/2007