

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 13, 2006
Secretary of State**

DOCUMENT# N05000004536

Entity Name: VILLAS VERACRUZ CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**485 2ND AVE. S.
NAPLES, FL 34102 US**New Principal Place of Business:****Current Mailing Address:**485 2ND AVE. S.
NAPLES, FL 34102 US**New Mailing Address:**RD3 BOX 275A
% SANDRA SNYDER
KITTANNING, PA 16201 US

FEI Number: 20-4779357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:JOHNSON, HENRY P
485 2ND AVE. S.
NAPLES, FL 34102 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: DP () Delete
Name: NAGY, JOHN R
Address: N 16 W 23415 STONERIDGE DR
City-St-Zip: WAUKESHA, WI 53188Title: DS () Delete
Name: DEDMORE, MICHAEL
Address: 111 CAPRI BOULEVARD
City-St-Zip: NAPLES, FL 34113Title: DT () Delete
Name: NORMAN, L.R.
Address: N 16 W 23415 STONEBRIDGE DR
City-St-Zip: WAUKESHA, WI 53188**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: JOHNSON, JILL
Address: 485 2ND AVE. S.
City-St-Zip: NAPLES, FL 34102Title: T (X) Change () Addition
Name: SNYDER, SANDRA J
Address: RD3 BOX 275A
City-St-Zip: KITTANNING, PA 16201Title: S (X) Change () Addition
Name: VOSS, KLAUS
Address: 475 2ND AVE S
City-St-Zip: NAPLES, FL 34102

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: JILL JOHNSON

MRS

06/13/2006

Electronic Signature of Signing Officer or Director_____
Date