

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 03, 2008  
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:**

RD3 BOX 275A  
% SANDRA SNYDER  
KITTANNING, PA 16201 US

**New Mailing Address:**

351 EAST BRADY RD  
% SANDRA SNYDER  
KITTANNING, PA 16201 US

FEI Number: 20-4779357      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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: P ( ) Delete  
Name: JOHNSON, JILL  
Address: 485 2ND AVE. S.  
City-St-Zip: NAPLES, FL 34102

Title: T ( ) Delete  
Name: SNYDER, SANDRA J  
Address: RD3 BOX 275A  
City-St-Zip: KITTANNING, PA 16201

Title: S ( ) Delete  
Name: VOSS, KLAUS  
Address: 475 2ND AVE S  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA J SNYDER

T

05/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date