

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011079

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: VILLA SERENA OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5955 T.G. LEE BLVD.  
SUITE 300  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

5955 T.G. LEE BLVD.  
SUITE 300  
ORLANDO, FL 32822

**New Mailing Address:**

FEI Number: 20-5328824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIHELICH, BRIAN M  
3810 NORTHDAL BLVD.  
SUITE 100  
TAMPA, FL 33624 US

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

LELAND MANAGEMENT  
5955 T.G. LEE BLVD  
SUITE 300  
ORLANDO, FL 32822 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: REBECCA FURLOW

04/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MIHELICH, BRIAN  
Address: 3810 NORTHDAL BLVD, SUITE 100  
City-St-Zip: TAMPA, FL 33624 US

Title: D ( ) Delete  
Name: HIDALGO, FRANCISCO  
Address: 10220 RIVER PALENCIA COURT  
City-St-Zip: RIVERVIEW, FL 33569 US

Title: DTS ( ) Delete  
Name: WILLIAMS, DARLENE  
Address: 3810 NORTHDAL BLVD, SUITE 100  
City-St-Zip: TAMPA, FL 33624 US

**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: BRIAN M MIHELICH

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date