

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009987

FILED  
Sep 03, 2009  
Secretary of State

**Entity Name:** VILLAS DEL SOL PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5115 16TH AVENUE SOUTH  
TAMPA, FL 33619

**New Principal Place of Business:**

14503 87TH AVENUE NORTH  
SEMINOLE, FL 33776

**Current Mailing Address:**

P.O. BOX 89397  
TAMPA, FL 33619

**New Mailing Address:**

14503 87TH AVENUE NORTH  
SEMINOLE, FL 33776

FEI Number: 20-8597321      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:**

FERNANDEZ, KRISTOPHER E  
114 S. FREMONT AVENUE  
TAMPA, FL 33606      US

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

OSTOW, JUSTIN  
14503 87TH AVENUE NORTH  
SEMINOLE, FL 33776      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: JUSTIN OSTOW

09/03/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: WOODS, ARTHUR G  
Address: 5115 16TH AVENUE SOUTH  
City-St-Zip: TAMPA, FL 33619

Title: D      ( ) Delete  
Name: WOODS, JASON  
Address: 5115 16TH AVENUE SOUTH  
City-St-Zip: TAMPA, FL 33619

Title: D      ( ) Delete  
Name: FERNANDEZ, KRISTOPHER E  
Address: 114 S. FREMONT AVENUE  
City-St-Zip: TAMPA, FL 33606

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

Title: D      (X) Change ( ) Addition  
Name: ABENE, JOHN  
Address: 1 TRADE WIND LANE  
City-St-Zip: SEA BRIGHT, NJ 07760

Title: D      (X) Change ( ) Addition  
Name: MCDONALD, MICHAEL  
Address: 4129 CHRUCH ROAD  
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: D      (X) Change ( ) Addition  
Name: CURCILLO, JODY  
Address: 325 CHESTNUT PLACE, SUITE 910  
City-St-Zip: PHILADELPHIA, PA 19106

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: JUSTIN OSTOW

RA

09/03/2009

Electronic Signature of Signing Officer or Director

Date