FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N06166

1. Corporation Name

VILLAGES OF THOUSAND OAKS HOMEOWNERS ASSOCIATION , INC.

Principal Place of Business
5505 80TH AVE. E. PALMETTO FL 34221

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

5505 80TH AVE. E. PALMETTO FL 34221

2a. Mailing Address

Suite, Apt. #, etc.

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FILED Mar 03, 1999 8:00 am § Secretary of State

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3. Date Incorporated or Qualifed

11/02/1984

4. FEI Number

2 City & State					59-2547784	Not	Applicable	
		City & State			00 20 11101	\$8.75 A		
28			City & State		5. Certificate of Status Desired		Fee Required	
Zip				ntry	6. Election Campaign Financing	\$5.00		
4	25 29 30			Trust Fund Contribution		Added to	Added to Fees	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent		
				81 Name				
SNUFFIN, CYNTHIA A				82 Street A	Address (P.O. Box Number is Not Acceptab	le)	•	
5602 80TH AVE E								
PALMETTO	O FL 34221			83				
				84 City		85 Zip C	ode	
						FL ST		
11. Pursuant i	to the provisions of Sections 617.0502	and 617.1508, Florida Stati	ites, the al	ove-named o	corporation submits this statement for the pration's board of directors. I hereby accept	urpose of changing its retained as required as require	egistered istered	
office or fe	egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 617.0503, F	orida Statı	ites.	addition of board of directors. Thereby decept	spps	-	
SIGNATURE	Commence of the commence of th							
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regist				equired when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	28 IN 12	
12.	OFFICERS AND	D DIRECTORS	13.				Addition	
TITLE	D		1.1 117	LE	D DOROTHY MITCHELL 1809 55 STREET PAIMETTO, FL			
NAME	CASCIO, ROBERT		1.2 NA	ME	DOROLLY STREET	FAST		
STREET ADDRESS	5508 80TH AVE E			REET ADDRESS	7807 33 37822	24221		
CITY-ST-ZIP	PALMETTO FL	□ priere		Y-ST-ZIP	PAIME/10) FL	Change	Addition	
TITLE	π		2.1 TIT			□ onango		
NAME	SARVER,I.E.		2.2 NA					
STREET ADDRESS	5505 80TH AVE			REET ADDRESS				
CITY-ST-ZIP	PALMETTO FL			TY-ST-ZIP		[] Change	Addition	
TITLE	D	☐ DELETE	3.1 TI			[] Change		
NAME	CABE, DOUGLAS		3.2 NA					
STREET ADDRESS	5507 80TH AVE E			REET ADDRESS				
CITY-ST-ZIP	PALMETTO FL	D DELETE		TY-ST-ZIP		[] Change	Additio	
TITLE	PD	DELETE		LE		[] Change	[] Additio	
NAME	SNUFFIN, CYNTHIA A.		4.2 N	_				
STREET ADDRESS	5602 80TH AVE. E.		4.3 ST	REET ADDRESS				
CITY-ST-ZIP	PALMETTO FL			ry-ST-ZIP		E1Channa	- Addition	
TITLE	D	DELETE	5.1 TI			Change	Addition	
NAME	WHITELEY, BOB		5.2 NA					
STREET ADDRESS	7805 55TH ST. E.			REET ADDRESS				
CITY-ST-ZIP	PALMETTO FL			ry-ST-ZIP		[]Che	Addition	
TITLE		☐ DELETE	6.1 717			Change	☐ Additio	
	1		6.2 NA	1.00				
NAME								
NAME STREET ADDRESS				REET ADORESS				

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E037 (11/98)

Applied For