

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010928

FILED
Apr 15, 2009
Secretary of State

Entity Name: VILLA DE LA VISTA SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1020 LAKE SUMTER LANDING
THE VILLAGES, FL 32162

New Principal Place of Business:

301 GUIDO AVE
THE VILLAGES, FL 32159

Current Mailing Address:

1020 LAKE SUMTER LANDING
THE VILLAGES, FL 32162

New Mailing Address:

301 GUIDO AVE
THE VILLAGES, FL 32159

FEI Number: 26-3803928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGENBRUNNER, ERICK D
1028 LAKE SUMTER LANDING
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

MILLHORN LAW FIRM
11938 COUNTY ROAD 101
110
THE VILLAGES, FL 32162 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: AMY REED

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WAHL, PETER F
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Delete
Name: HOOPFER, BOBBY JR.
Address: 1020 LAKE SUMBER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Delete
Name: SHARP, CHRISTINA
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POYNTER, MARILYN
Address: 301 GUIDO AVE
City-St-Zip: THE VILLAGES, FL 32159

Title: VP (X) Change () Addition
Name: SIGWORTH, KEN
Address: 302 GUIDO AVE
City-St-Zip: THE VILLAGES, FL 32159

Title: S (X) Change () Addition
Name: SMALLING, SHARON
Address: 1650 GARCIA AVE
City-St-Zip: THE VILLAGES, FL 32159

Title: T () Change (X) Addition
Name: SMALLING, SHARON
Address: 1650 GARCIA AVE
City-St-Zip: THE VILLAGES, FL 32159

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: SHARON SMALLING

S

04/15/2009

Electronic Signature of Signing Officer or Director

Date