

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010928

FILED  
Feb 03, 2012  
Secretary of State

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

**Current Principal Place of Business:**

1662 GARCIA COURT  
THE VILLAGES, FL 32159

**New Principal Place of Business:**

**Current Mailing Address:**

VILLA DE LA VISTA SO. HOA  
PO BOX 1356  
LADY LAKE, FL 32159

**New Mailing Address:**

1662 GARCIA COURT  
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:**

MILLHORN LAW FIRM  
11938 COUNTY ROAD 101  
110  
THE VILLAGES, FL 32162 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: PRES  
Name: ZOELLER, JAMES B  
Address: 1662 GARCIA COURT  
City-St-Zip: THE VILLAGES, FL 32159

Title: VP  
Name: POYNTER, MARYLAND  
Address: 301 GUIDO AVE  
City-St-Zip: THE VILLAGES, FL 32159

Title: SEC  
Name: MCCOURT, MICHAEL L  
Address: 1664 GARCIA COURT  
City-St-Zip: THE VILLAGES, FL 32159

Title: TRES  
Name: SIGWORTH, CINDY  
Address: 403 DUARTE LANE  
City-St-Zip: THE VILLAGES, FL 32159

Title: B/M  
Name: SEIDEL, THOMAS  
Address: 306 GUIDO AVE  
City-St-Zip: THE VILLAGES, FL 32159

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL L. MCCOURT

SECR

02/03/2012

Electronic Signature of Signing Officer or Director

Date