

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 22 AM 9:03

DOCUMENT # N15364 (5)

1. Corporation Name

VILLA CITY HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 331 RD  
GROVELAND FL 34736

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GROVELAND FL 34736

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
06/12/1986

3a. Date of Last Report  
05/01/1994

4. FEI Number  
59-2548653

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status ☐

\$68.75 Supplemental  
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STOKES, RUTH V  
6206 LAKE EMMA RD  
GROVELAND FL 32736

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME LYKES, ROBERT  
STREET ADDRESS 6711 N ST  
CITY-ST-ZIP GROVELAND FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE VD  
NAME KING, HOWARD  
STREET ADDRESS 5772 MICHELE LANE  
CITY-ST-ZIP SANFORD FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE S  
NAME THOMPSON, NORMA  
STREET ADDRESS 18428 VILLA CITY RD.  
CITY-ST-ZIP GROVELAND FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T  
NAME STOKES, RUTH V  
STREET ADDRESS 6206 LAKE EMMA RD  
CITY-ST-ZIP GROVELAND FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME DALESIO, DON  
STREET ADDRESS 5809 MARYS VILLA RD  
CITY-ST-ZIP GROVELAND FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME DUVALL, DORIS  
STREET ADDRESS 17920 LAKE LUCY LANE  
CITY-ST-ZIP GROVELAND FL

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ruth V. Stokes* RUTH V STOKES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

3-7-95

904-394-3256

Date

Telephone

VILLA CITY HOMEOWNERS ASSOCIATION INC  
FEI # 59-2548653

ADDITIONAL DIRECTORS:

GENE BROWN (D)  
18725 VILLA CITY ROAD  
GROVELAND, FL 34736

MARY NORRIS (VP)  
6630 LAKE EMMA ROAD  
GROVELAND, FL 34736

SARALYNN LESLIE (P)  
6649 LAKE EMMA ROAD  
GROVELAND, FL 34736

ANNETTE MILLER (S)  
18929 ORANGE AVENUE  
GROUGLAND, FL 34736