2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State
03-24-2003 90196 046 ****61.25

DOCUMENT # N15364

1. Entity Name
VILLA CITY HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 331 RD GROVELAND FL 34736	P.O. BOX 331 RD GROVELAND FL 34736

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2548653 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~KYLE, HAROLD~~ E
~~5639 MARYSVILLA RD~~ MELICIA G PUSKAS
GROVELAND FL 34736 18316 W. Shore Lane

7. Name and Address of New Registered Agent

Name MELICIA G PUSKAS
Street Address (P.O. Box Number is Not Acceptable) 18316 W Shore Lane
City Groveland
FL Zip Code 34736

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE M Puskas 3/21/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	☑ Delete
NAME	HOLT, MICHAEL	
STREET ADDRESS	6920 MARYLAND AVE	
CITY-ST-ZIP	GROVELAND FL 34736	
TITLE	VP	☑ Delete
NAME	REAVES, FRANKLIN	
STREET ADDRESS	5601 MOON LAKE RD	
CITY-ST-ZIP	GROVELAND FL 34736	
TITLE	S	☑ Delete
NAME	KREBILL, BELINDA	
STREET ADDRESS	18110 MORRISON ST	
CITY-ST-ZIP	GROVELAND FL 34736	
TITLE	D	☑ Delete
NAME	WOLFE, TED	
STREET ADDRESS	5136 LAKE EMMA RD	
CITY-ST-ZIP	GROVELAND FL 34736	
TITLE	D	☑ Delete
NAME	PUSKAS, MELICIA	
STREET ADDRESS	18316 WEST SHORE LN	
CITY-ST-ZIP	GROVELAND FL 34736	
TITLE	D	☑ Delete
NAME	HANSEN, ANDREW	
STREET ADDRESS	19415 VILLA CITY RD	
CITY-ST-ZIP	GROVELAND FL 34736	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☑ Change ☐ Addition
NAME	FRANKLIN REAVES	
STREET ADDRESS	5601 Moon Lake Rd	
CITY-ST-ZIP	Groveland, Fla 34736	
TITLE	VP	☑ Change ☐ Addition
NAME	Tom Ferguson	
STREET ADDRESS	Box 581	
CITY-ST-ZIP	Groveland, Fla 34736	
TITLE	S	☑ Change ☐ Addition
NAME	Benzel, Cyndi	
STREET ADDRESS	7403 Lake Emma Road	
CITY-ST-ZIP	Groveland, Fla 34736	
TITLE	T	☑ Change ☐ Addition
NAME	Melicia Puskas	
STREET ADDRESS	18316 W Shore Lane	
CITY-ST-ZIP	Groveland, Fla 34736	
TITLE		☑ Change ☐ Addition
NAME	Hansen, Andrew	
STREET ADDRESS	19022 Orange Ave	
CITY-ST-ZIP	Groveland, Fla 34736	
TITLE	D	☑ Change ☐ Addition
NAME	Bud Kyle	
STREET ADDRESS	5639 Marysville Road	
CITY-ST-ZIP	Groveland Fla 34736	

CR2E037 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED M Puskas 3/21/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR