

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26437

FILED
Mar 23, 2008
Secretary of State

Entity Name: VILLA POINTE RECREATION AREA ASSOCIATION, INC.

Current Principal Place of Business:

DAVENPORT PROFESSIONAL PROP MGMT INC.
6620 LAKE WORTH ROAD, STE E
LAKE WORTH, FL 33467 US

New Principal Place of Business:

DAVENPORT PROFESSIONAL PROP MGMT INC.
6620 LAKE WORTH ROAD, STE F
LAKE WORTH, FL 33467 US

Current Mailing Address:

6620 LAKE WORTH RD
E
LAKE WORTH, FL 33467 US

New Mailing Address:

6620 LAKE WORTH RD
STE F
LAKE WORTH, FL 33467 US

FEI Number: 65-0136100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF PA
1818 AUSTRALIAN AVE. SOUTH
SUITE 400
WEST PALM BEACH, FL 33401 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: PT () Delete
Name: ELSBERRY, JAMES
Address: 1985 MONKS CT
City-St-Zip: W PALM BCH, FL 33415

Title: D () Delete
Name: PATTERSON, BRENDA
Address: 1925 MONKS COURT
City-St-Zip: W PALM BCH, FL 33415

Title: D () Delete
Name: OLES, CATHY A
Address: 1951 MONKS COURT
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S () Delete
Name: GOODMAN, DONNA
Address: 1939 MONKS CT
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ELSBERRY, JAMES
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: SD (X) Change () Addition
Name: PATTERSON, BRENDA
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: PD (X) Change () Addition
Name: OLES, CATHY A
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Change () Addition
Name: SWEENEY, DAN
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

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: CATHY OLES

P

03/23/2008

Electronic Signature of Signing Officer or Director

Date