


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90323 013 ****61.25

DOCUMENT # N34329

1. Entity Name
VILLA COSTA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address

**3210 S OCEAN BLVD
3210 S. OCEAN BLVD.
HIGHLAND BEACH FL 33487
US**

**VILLA COSTA CONDO. ASSN.
3210 S OCEAN BLVD
HIGHLAND BEACH FL 33487
US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



1st MOORE CR2E037 (10/04)

4. FEI Number Applied For

NO-T APPLICABLE Not Applicable

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

6. Name and Address of Current Registered Agent

**GROSS, WILLIAM
3210 S OCEAN BLVD
HIGHLAND BEACH FL 33487**

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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	VD	<input type="checkbox"/> Delete
NAME	FELDMAN, CARL	
STREET ADDRESS	3210 S. OCEAN BLVD	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	V	<input type="checkbox"/> Delete
NAME	NEWILL, JAMES W	
STREET ADDRESS	3210 S OCEAN BLVD	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	PD	<input type="checkbox"/> Delete
NAME	GROSS, WILLIAM	
STREET ADDRESS	3210 S OCEAN BLVD	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	S	<input type="checkbox"/> Delete
NAME	BENNETT, HILDA	
STREET ADDRESS	3210 S. OCEAN BLVD	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	I	<input type="checkbox"/> Delete
NAME	MAISEL, LEONARD	
STREET ADDRESS	3210 S. OCEAN BLVD.	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carl Feldman	
STREET ADDRESS	3210 S. Ocean Blvd	
CITY-ST-ZIP	Highland Beach 33487 Fla.	
TITLE	V. P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James W. Newill	
STREET ADDRESS	3210 S. Ocean Blvd	
CITY-ST-ZIP	Highland Beach Fla. 33487	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	William Gross	
STREET ADDRESS	3210 S. Ocean Blvd	
CITY-ST-ZIP	Highland Beach Fla. 33487	
TITLE	Sec	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hilda Bennett	
STREET ADDRESS	3210 S. Ocean Blvd	
CITY-ST-ZIP	Highland Beach Fla. 33487	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Leonard Maisel	
STREET ADDRESS	3210 S. Ocean Blvd (Sgt at Arms)	
CITY-ST-ZIP	Highland Beach Fla. 33487	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Carl Feldman Date: 04/27/05 Daytime Phone #: 05-561-872-2676