9/12/01-90018-040-\$61.25-\$61.25

DOCUMENT # N9600002435 1. Entity Name					FILED SECRETARY OF STATE OFFICE CORPORATIONS						
VILLAS AT	ISLAND CLUB CONDON	IINIUM ASSOCIATIO	ON, I	1			TIVISION	OF COR	Perat	10HF	
Principal Place of Business Mallin		Mailing Address	ailing Address			01 SEP 25 AM 9:28					
P.O. BOX 422304 P		P.O. BOX 422304 KISSIMMEE FL 34742	P.O. BOX 422304					1 0 0 0 1			
				•				I ar na ri ya 11 %	4 MIN 11888	1818 1 818 1 81 1	
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address								
Suite, Apt. #, etc. Su		Suite, Apt. #, etc.	uite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State	City & State ^		City & State		4.	4. FEI Number 59-3550874				oplied For	
Zip	Country	Zip	Co	untry	5.	Certificate of	Status Desired		8.75 Add		
6. Name and Address of Current Registered Age		t Registered Agent		Name	7.	7. Name and Address of New Registered Agent					
M.D. SERVICI 2777 POINCU KISSIMMEE F	ANA BLVD.			Street A	ddress (P.O.	Box Number i	s Not Acceptable	a)			
NSSIMMEE PL 34/40		٠	City			FL 2			Zip Cod	Zip Code	
8. The above name SIGNATURE	ned entity submits this statement							rida. 30 0	1		
	ature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Register	ed Agent signati.	ure required when	reinstating)					
FILE NOW: FEE IS \$61.25 After September 12, 2001, min. will be \$236.25 9. Election Campa Trust Fund Con				\$5. Add	00 May Be ed to Fees		ke Check I epartment				
10.	OFFICERS AND D		11.			TIONS/CHAN	GES TO OFFICE	RS AND DIRE	CTORS IN		
STREET ADDRESS 87	RODICK, RAYMOND 117 C. ROCKINGHAM TERR	X Delete		NE DORESS NEET ADORESS Y-ST-ZIP			Palms C	. I.	Change Change	Addition	
TITLE VI		Delete	TITI	(T)	SEC	snyder	FL 3474		Change	Addition	
STREET ADDRESS 87	ATTERSON, BOB 25 TERRA VISTA CIR., APT. 1 SSIMMEE FL 34747	101	STR		2920-1	akeside	Drive_				
TITLE ST		Delete	TITE NAJ	(A)	ires.	n Mille	e,TX 7)	Change	Addition	
STREET ADORESS 34	RIVERBEND RD LINTON NJ 08809		STR	EET ADDRESS Y-ST-ZIP	3407 0	ak Alley	Ct: #21	o			
TITLE		☐ Delete	TITL	.E	101.40	, 211 -			Change	Addition	

2001 UNIFORM BUSINESS REPORT (UBR)

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.

TITLE NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

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Delete

SIGNATURE: SEMATURE AND TYPES 197/2EQUIRED

TITLE

TITLE

NAME STREET ADDRESS

TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

407-787-0182

Change

Change

Addition

Addition