

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 09, 2007
Secretary of State**

DOCUMENT# N99000003057

Entity Name: VENTANAS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 65-0927935 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN L
431 WAVERLY ROAD
TALLAHASSEE, FL 32312 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: DP () Delete
Name: KALFAS, JIMMY
Address: 2165 DELTA WAY
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: HULL, DONNA
Address: 2170 DELTA WAY
City-St-Zip: TALLAHASSEE, FL 32303

Title: DVP () Delete
Name: ARNOLD, ANNMARIE
Address: 2194 DELTA WAY
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: HULL, DONNA
Address: 2170 DELTA WAY
City-St-Zip: TALLAHASSEE, FL 32303

Title: DS (X) Change () Addition
Name: MACFALL, KATHERINE
Address: 2144 DELTA WAY
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the 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: JIMMY KALFAS

DP

04/09/2007

Electronic Signature of Signing Officer or Director

Date