

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000034531	
1. Entity Name SAN POLO VILLAS HOMEOWNER'S ASSOCIATION, INC.	

Principal Place of Business 746 VIA SAN POLO LADY LAKE FL 32159	Mailing Address P.O. BOX 1924 LADY LAKE FL 32158
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent RICHEY, STEVEN J 1009 NORTH 14TH STREET LEESBURG FL 34749-2460	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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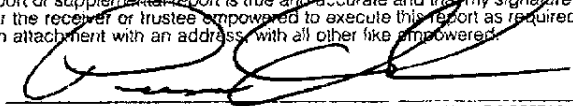
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
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SIGNATURE Signature: typed or printed name of registered agent and info if applicable (NOTE: Registered Agent signature required when resigning)	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FORTIN, PIERRE R 746 VIA SAN POLO LADY LAKE FL 32159	TITLE NAME STREET ADDRESS CITY-ST-ZIP	U000000518175 05/01/06-80077-018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FOCTIN, PIERRE 746 VIA SAN ALO LADY LAKE FL 32159	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 607, 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.	
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SIGNATURE: 	4-17-06 352-516-8516
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