

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000084581

**FILED**  
**Jan 12, 2005**  
**Secretary of State**

**Entity Name:** VILLADELTA HOMES CORPORATION

**Current Principal Place of Business:**

1425 SE VILLAGE GREEN DR  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1425 SE VILLAGE GREEN DR  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 65-0534411      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AURELIO, PEREIRA  
456 NW RAVENSWOOD LANE  
PORT SAINT LUCIE, FL 34952      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: AURELIO, PEREIRA  
Address: 456 NW RAVENSWOOD LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VP      ( ) Delete  
Name: DUDLEY, YVONNE P  
Address: 139 N NARANJA  
City-St-Zip: PORT SAINT LUCIE, FL 34983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: AURELIO, PEREIRA  
Address: 456 NW RAVENSWOOD LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP      (X) Change ( ) Addition  
Name: DUDLEY, YVONNE P  
Address: 140 NE NARANJA AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YVONNE P DUDLEY

VP

01/12/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date