2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003056

Entity Name: VDL OWNERS ASSOCIATION, INC.

Apr 27, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

KEYS-CALDWELL, INC 1162 INDIAN HILLS BLVD VENICE, FL 34293

Current Mailing Address: New Mailing Address:

KEYS-CALDWELL, INC 1162 INDIAN HILLŚ BLVD VENICE, FL 34293

FEI Number: 59-3720284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KEYS-CALDWELL, INC 1162 INDIAN HILLS BLVD VENICE, FL 34293

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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

VENICE, FL 34292

VENICE, FL 34292

(X) Change () Addition () Delete SCHNEIDER, ERIC SCHNEIDER, SHARON Name: Name: 247 VISTA DEL LAGO WAY Address: 247 VISTA DEL LAGO WAY Address: City-St-Zip: VENICE, FL 34292 City-St-Zip: VENICE, FL 34292

(X) Change () Addition Title: () Delete Title: Name: TAMANDLI, BOB Name: MATHEW, NINAN

Address: 232 VISTA DEL LAGO WAY Address: 225 VISTA DEL LAGO WAY City-St-Zip: VENICE, FL 34292 City-St-Zip: VENICE, FL 34292

Title: () Delete Title: PD (X) Change () Addition SCHAADT, JOYCE Name: TOMASO, TONY Name:

218 VISTA DEL LAGO WAY 230 VISTA DEL LAGO WAY Address: Address:

City-St-Zip: VENICE, FL 34292 City-St-Zip: VENICE, FL 34292

(X) Change () Addition Title: SD () Delete Title: SD Name: KLIEN, DELORES Name: AUXIER, DENVER

Address: 240 VISTA DEL LAGO WAY Address: 245 VISTA DEL LAGO WAY City-St-Zip: VENICE, FL 34292 City-St-Zip: VENICE, FL 34292

Title: VD () Delete Title: (X) Change () Addition

OHMOTT, CARL OHMOTT, CARL Name: Name: 239 VISTA DE LAGO WAY 239 VISTA DE LAGO WAY Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: TONY TOMASO **PRES** 04/27/2008