

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007407

FILED
Feb 04, 2009
Secretary of State

Entity Name: VILLA DEL SOL AT MEADOW WOODS MASTER ASSOCIATION INC.

Current Principal Place of Business:

2909 GRAFTON DR
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

2909 GRAFTON DR
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 65-1166212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOYLE, PHILIP J
2909 GRAFTON DRIVE
KISSIMMEE, FL 34741 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: SANTIAGO, JUDY
Address: 502 VILLA DEL SOL CR.
City-St-Zip: ORLANDO, FL 32824

Title: DV () Delete
Name: LOPEZ, ANTOZIO
Address: 2138 DARLIN CR.
City-St-Zip: ORLANDO, FL 32820

Title: DS () Delete
Name: BRITTO, TONYA
Address: 516 VILLA DEL SOL CR. # 205
City-St-Zip: ORLANDO, FL 32824

Title: DT () Delete
Name: MAGDALENA, FELICIANO
Address: 508 VILLA DEL SOL CIR #105
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: DOYLE, DIANE
Address: 2909 GRAFTON DRIVE
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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.

SIGNATURE: JUDY SANTIAGO

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date