

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760381

**FILED**  
**Apr 24, 2013**  
**Secretary of State**  
**CC1199242923**

**Entity Name:** THE VILLAS OF ST. GEORGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1391 TIMBERLANE RD  
SUITE 206  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

P O BOX 876  
EASTPOINT, FL 32328 US

**FEI Number: 59-2145871**

**Certificate of Status Desired: Yes**

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

COMMUNITY MANAGEMENT SERVICES, INC  
1914 SUNSET DRIVE  
ST GEORGE ISLAND, FL 32328 US

*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

**Officer/Director Detail :**

Title D  
Name HEIDE, ROBERT D  
Address P.O. BOX 688  
City-State-Zip: EASTPOINT FL 32328

Title T/S  
Name DUGGAR, ED  
Address 1889 WITCH TREE ACRES  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name LAUGHLIN, WILLIAM  
Address 2110 ELLICOTT DR  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name HARPER, WILLIAM  
Address 519 CARR LANE  
City-State-Zip: TALLAHASSEE FL 32312

Title P  
Name TAYLOR, GEORGE  
Address 1178 PEBBLES DRIVE  
City-State-Zip: SMYRNA TN 37167

Title VP  
Name MCCALL, ED  
Address 2562 ROYAL OAKS DRIVE  
City-State-Zip: TALLAHASSEE FL 32309

*I hereby 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 all other like empowered.*

**SIGNATURE: GEORGE TAYLOR**

**P**

**04/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date