

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765500

**Entity Name:** VILLAS AT RIVER RUN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1069 VILLA DR #B-202  
A-204  
LABELLE, FL 33935

**Current Mailing Address:**

P. O. BOX 1812  
LABELLE, FL 33975-1812

**FEI Number: 59-2459665**

**Certificate of Status Desired: No**

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

WILLARD, BARBARA  
381 SR 80 WEST  
LABELLE, FL 33935 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 QUAYLE, ROSE  
Address 1033 VILLA DR #A-204  
City-State-Zip: LABELLE FL 33935

Title D, DIRECTOR  
Name WOODY, JAMES  
Address 6900 LOFTWOOD DR  
City-State-Zip: KNOXVILLE TN 37920

Title D  
Name BARNES, TONY  
Address 3800 CR 78  
City-State-Zip: LABELLE FL 33935

*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: QUAYLE, ROSE**

**D**

**03/30/2016**

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

\_\_\_\_\_  
Date