

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

DOCUMENT# N31728

**Entity Name:** VANDERBILT VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

509 ROMA COURT  
NAPLES, FL 34110

**Current Mailing Address:**

1040 6TH AVE. N.  
NAPLES, FL 34102 US

**FEI Number:** 65-0116136

**Certificate of Status Desired:** No

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

VALENTINI, VINCENT P  
1040 6TH AVE. N.  
NAPLES, FL 34102 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 PD  
Name PANDISCIO, JOE  
Address 509 ROMA CT.  
208  
City-State-Zip: NAPLES FL 34110

Title SD  
Name PLOURDE, RON  
Address 209 WADING RIVER RD.  
City-State-Zip: CENTER MORICHES NY 11934

Title VPD  
Name DICKSON, ANN  
Address 509 ROMA CT.  
#202  
City-State-Zip: NAPLES FL 34110

Title TD  
Name DIGIOA, TOM  
Address 405 SHREWSBURY ST  
City-State-Zip: WORCESTER MA 01604

Title D  
Name BAKER, LINDA  
Address 509 ROMA CT. #205  
City-State-Zip: NAPLES FL 34110

*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: PANDISCIO, JOE**

**PRESIDENT**

**04/24/2013**

Electronic Signature of Signing Officer/Director Detail

Date