

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

DOCUMENT# N35684

**Entity Name:** WESTON VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2604 LOWELL CIR  
MELBOURNE, FL 32935

**Current Mailing Address:**

P.O. BOX 410312  
MELBOURNE, FL 32941-0312 US

**FEI Number:** 59-2997274

**Certificate of Status Desired:** No

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

SQUIRES, JOY  
2642 LOWELL CIR  
MELBOURNE, FL 32935 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:** JOY SQUIRES

03/25/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CRISAFULLI, JOEL  
Address 2608 LOWELL CIR  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name SQUIRES, DAVID  
Address 2604 LOWELL CIR  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name BROWN, DAVID  
Address 2627 LOWELL CIR  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name REYES, SERGIO  
Address 2600 LOWELL CIR  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name O'NEAL, KELVIN  
Address 2638 LOWELL CIRCLE  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name SQUIRES, JOY  
Address 2604 LOWELL CIRCLE  
City-State-Zip: MELBOURNE FL 32935

*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:** JOY SQUIRES

**TREASURER**

03/25/2013

Electronic Signature of Signing Officer/Director Detail

Date