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: EILEEN M BURKE

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
<u>REPORT</u>

DOCUMENT# N98000001390

Entity Name: LAS VILLAS OF SOUTH SHORE, INC.

Current Principal Place of Business:

1315 CASA BONITA AVE. RUSKIN, FL 33570

Current Mailing Address:

PO BOX 747 RUSKIN, FL 33575 US

FEI Number: 90-0682647

Name and Address of Current Registered Agent:

BURKE, EILEEN M 220 12TH STREET SE RUSKIN, FL 33570 US Certificate of Status Desired: Yes

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	EILEEN M BURKE			07/31/2015	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Ρ	Title	SECRETARY		
Name	BURKE, EILEEN	Name	CHRISELDA, CARMONA		
Address	PO BOX 747	Address	PO BOX 747		
City-State-Zip:	RUSKIN FL 33575	City-State-Zip:	RUSKIN FL 33575		
Title	TREASURER	Title	VP		
Name	RIOS, DESIREE	Name	SALDANA, MARGARITA		
Address	PO BOX 747	Address	PO BOX 747		
City-State-Zip:	RUSKIN FL 33575	City-State-Zip:	RUSKIN FL 33575		
Title	OFFICER				
Name	KLAKAMP, PARTICIA				
Address	PO BOX 747				
City-State-Zip:	RUSKIN FL 33575				

PRESIDENT

FILED Jul 31, 2015 Secretary of State CC0848977918

Date