# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003057

### Entity Name: VENTANAS HOMEOWNERS' ASSOCIATION, INC.

### **Current Principal Place of Business:**

2121 KILLARNEY WAY TALLAHASSEE, FL 32309

### **Current Mailing Address:**

POST OFFICE BOX 11143 TALLAHASSEE, FL 32302 US

## FEI Number: 65-0927935

### Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT 2121 KILLARNEY WAY TALLAHASSEE, FL 32309 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

### **Officer/Director Detail :**

Title	PD	Title	DVP
Name	HULL, DONNA	Name	MACFALL, KATHERINE
Address	POST OFFICE BOX 11143	Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309
Title	DST	Title	D
Name	HALES, BRITTANY	Name	BOWDEN, DIANE
Address	POST OFFICE BOX 11143	Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309
Title	D		
Name	HERTZ, HELGA		
Address	POST OFFICE BOX 11143		
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.

PD

### SIGNATURE: DONNA HULL

Electronic Signature of Signing Officer/Director Detail

FILED Apr 15, 2013 Secretary of State CC9036795077

Date

Certificate of Status Desired: No

04/15/2013 Date