2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701733

Entity Name: THE VILLAS INC

FILED Mar 05, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
425 WOR ⁻ PALM BCH	TH AVE. H, FL 33480						
Current Mailing Address:				New Mailing Address:			
425 WOR ⁻ PALM BCH	TH AVE. H, FL 33480						
FEI Number:	: 59-0883573	FEI Number Applied For ()	FEI Numbe	r Not Appli	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Na	ame and	Address of New Registered Agent:		
625 NORT 9TH FLOC WEST PAI The above	LM BEACH, F	L 33401 US	purpose of ch	nanging it	its registered office or registered agent, or b	oth,	
SIGNATURE: Electronic Signature of Registered Agent			nent		Date		
OFFICERS	S AND DIREC		•	DDITION	NS/CHANGES TO OFFICERS AND DIREC	TORS:	
Title:) Delete	Tit	ے۔ ام	() Change () Addition		
Name: Address: City-St-Zip:	SCHULER, JC 425 WORTH A PALM BEACH	OHN AVENUE	Na Ad	me: me: dress: :y-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (FERRIN, BAR 425 WORTH A PALM BEACH	AVENUE	Ad	le: me: dress: y-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DVP (O'HERRON, K 425 WORTH A PALM BEACH	\VE	Ad	le: me: dress: :y-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (GADD, SARA 425 WORTH A PALM BEACH	\VE	Ad	le: me: dress: :y-St-Zip:	D (X) Change () Addition HAMILTON, ANITA MRS 425 WORTH AVE PALM BEACH, FL 33480		
Title: Name: Address: City-St-Zip:	DT (KEANE, MARI 425 WORTH A PALM BEACH	\VE	Ad	le: me: dress: y-St-Zip:	DT (X) Change () Addition ARMSTRONG, ANDREW 425 WORTH AVE PALM BEACH, FL 33480		
Title: Name: Address: City-St-Zip:	LYNCH, FRAN 625 N FLAGLI) Delete ICIS X J ER DRIVE, 9TH FLR BEACH, FL 33401	Ad	le: me: dress: y-St-Zip:	S (X) Change () Addition COLBY, BRENT A 425 WORTH AVE PALM BEACH, FL 33480		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRENT COLBY S 03/05/2009