

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710984

FILED
Jul 18, 2009
Secretary of State

Entity Name: CARIBBEAN VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

1730 CARIBBEAN CIRCLE
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

1730 CARIBBEAN CIRCLE
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 59-1237881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TOLMAN, JOHN S.
1730 CARRIBBEAN CIRCLE
VENICE, FL 34293 US

Name and Address of New Registered Agent:

TOLMAN, JOHN . S
1730 CARRIBBEAN CIRCLE
VENICE, FL 34293 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: JOHN S. TOLMAN TREASURER

07/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: TOLMAN, JOHN S
Address: 1730 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

Title: P () Delete
Name: SIMMONS, RICHARD
Address: 1735 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

Title: S () Delete
Name: KYLE, GEORGE
Address: 1737 CARRIBBEAN CIR
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: TOLMAN, JOHN
Address: 1730 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

Title: AT () Delete
Name: EDSEP, NEENIE
Address: 1753 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: PLUMMER, JUDITH
Address: 1525 LAKESIDE DRUVE
City-St-Zip: VENICE, FL 34293

Title: T (X) Change () Addition
Name: TOLMAN, JOHN S
Address: 1730 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

Title: AT (X) Change () Addition
Name: EDSON, NEENIE
Address: 1753 CARIBBEAN CIRCLE
City-St-Zip: VENICE, FL 34293

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: JOHN S. TOLMAN

TREA

07/18/2009

Electronic Signature of Signing Officer or Director

Date