

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717746

FILED
Apr 29, 2005
Secretary of State

Entity Name: VILLAS SOCIAL CLUB, INC.

Current Principal Place of Business:

4301 N.W. 48TH AVE
FORT LAUDERDALE, FL 333194659

New Principal Place of Business:

Current Mailing Address:

4301 N.W. 48TH AVE
FORT LAUDERDALE, FL 333194659

New Mailing Address:

FEI Number: 59-1366036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILES, JAMES
10034 W. MCNAB ROAD
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: REID, MAISIE
Address: 10034 W. MCNAB ROAD
City-St-Zip: TAMARAC, FL 33321

Title: PD () Delete
Name: MCKENZIE, EILEEN
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

Title: TD () Delete
Name: DICHNER, RENEE
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33324

Title: SD () Delete
Name: WINSOME, BAILEY
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

Title: VPD () Delete
Name: BARRY, PATRICK
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: BADDAL, ELSIE
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: MARSHALL, ALICE
Address: 10034 W. MCNAB ROAD
City-St-Zip: TAMARAC, FL 33321

Title: PD (X) Change () Addition
Name: TWYMAN, BETTY
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

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

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

Title: 2VPD (X) Change () Addition
Name: MORRIS, ED
Address: 10034 W. MCNAB RD.
City-St-Zip: TAMARAC, FL 33321

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETTY TWYMAN

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date