

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 21, 2008**  
**Secretary of State**

DOCUMENT# 722927

Entity Name: VILLA BIANCA ASSOCIATION ,INC.

**Current Principal Place of Business:**C/O DMS, INC  
6047 KIMBERLY BLVD STE W  
N LAUDERDALE, FL 33068**New Principal Place of Business:**VILLA BIANCA CONDOMINIUM  
3990 WOODSIDE DRIVE  
CORAL SPRINGS, FL 33065**Current Mailing Address:**GRACE COMMUNITY MGMT.  
5079 N DIXIE HIGHWAY, #340  
FORT LAUDERDALE, FL 33334**New Mailing Address:**MOHAMMED MCLEAN  
6587 NW 1ST CT  
MARGATE, FL 33063

FEI Number: 59-2534120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**GRACE COMMUNITY MANAGENT, INC  
5348 NE 6 AVE, SUITE F  
FORT LAUDERDALE, FL 33334 US**Name and Address of New Registered Agent:**MCLEAN, MOHAMMED I PRESIDE  
6587 NW 1ST CT  
MARGATE, FL 33063 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: MOHAMMED I MCLEAN

11/21/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: KHOUDARY, DENISE  
Address: 3990 WOODSIDE DRIVE #11  
City-St-Zip: CORAL SPRINGS, FL 33065Title: VP ( ) Delete  
Name: STEVE, JOHN  
Address: 3990 WOODSIDE DR. #25  
City-St-Zip: POMPANO BEACH, FL 33065Title: T ( ) Delete  
Name: CANTERINO, DIANE  
Address: 438 FLAGG PLACE  
City-St-Zip: STATEN ISLAND, NY 10304**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: MCLEAN, MOHAMMED I  
Address: 6587 NW 1ST CT  
City-St-Zip: MARGATE, FL 33063Title: VP (X) Change ( ) Addition  
Name: LEMOINE, JEAN E  
Address: 3990 WOODSIDE DR. #14  
City-St-Zip: CORAL SPRINGS, FL 33065Title: T (X) Change ( ) Addition  
Name: MEHU, JEAN E  
Address: 3990 WOODSIDE DRIVE#17  
City-St-Zip: CORAL SPRINGS, FL 33065

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: MOHAMMED I MCLEAN

PRES

11/21/2008

Electronic Signature of Signing Officer or Director

Date