

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731827

FILED
Jan 21, 2009
Secretary of State

Entity Name: NOVA VILLAS CONDOMINIUM, INC.

Current Principal Place of Business:

2391 SW 70TH AVENUE
DAVIE, FL 33317

New Principal Place of Business:

Current Mailing Address:

2391 SW 70TH AVENUE
DAVIE, FL 33317

New Mailing Address:

FEI Number: 59-1686864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALCEDO, ROBERTA
2368 SW 70 WAY
DAVIE, FL 33317 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: VD () Delete
Name: MORALES, FEDERICO
Address: 2330 SW 70 TERR
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: D () Delete
Name: GAGNON, ALMA
Address: 2340 SW 70 TERRACE
City-St-Zip: DAVIE, FL 33317

Title: TD () Delete
Name: SALCEDO, ROBERTA
Address: 2368 SW 70 WAY
City-St-Zip: DAVIE, FL 33317

Title: D () Delete
Name: WIEDNER, CAROL
Address: 7030 SW 23 STREET
City-St-Zip: DAVIE, FL 33317

Title: S () Delete
Name: LECHER, DONNA
Address: 2353 SW 70 TERR
City-St-Zip: DAVIE, FL 33317

Title: P () Delete
Name: BILLINGS, MARGARET
Address: 2358 SW 70 WAY
City-St-Zip: DAVIE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: DISABATINO, KATHY
Address: 7044 SW 23 STREET
City-St-Zip: DAVIE, FL 33317

Title: SD (X) Change () Addition
Name: LECHER, DONNA
Address: 2353 SW 70 TERR
City-St-Zip: DAVIE, FL 33317

Title: PD (X) Change () Addition
Name: BILLINGS, MARGARET
Address: 2358 SW 70 WAY
City-St-Zip: DAVIE, FL 33317

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: ROBERTA SALCEDO

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01/21/2009

Electronic Signature of Signing Officer or Director

Date