## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 738345** 

FILED Mar 25, 2009 Secretary of State

Entity Name: VILLAS CAPRI ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

VILLAS CAPRI ASSN 12200 VONN RD LARGO, FL 33774

Current Mailing Address: New Mailing Address:

 12200 VUNN RD
 1301 SEMINOLE BLVD

 OFFICE BOX
 SUITE 110

 LARGO, FL 33774
 LARGO, FL 33770

FEI Number: 59-1794536 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VITRONE, DOROTHY
12200 VONN RD
5C

QUALIFIED PROPERTY MANAGEMENT
5401 US 19 N.
SUITE 7Q

LARGO, FL 33744 US NEW PORT RICHEY, FL 34652 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: MARY A. WHITE 03/25/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: PD (X) Change () Addition

 Name:
 VITRONE, DOROTHY
 Name:
 SAUR, LOUIS

 Address:
 12200 VONN RD 5C
 Address:
 12200 VONN RD, #2203

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 LARGO, FL 33774

Title: D ( ) Delete Title: VD (X) Change ( ) Addition Name: HOLDEREID, AUGUST Name: ZNACK, MICHELINE

 Name
 Holdereid, Addost
 Name
 ZNACK, MICHELINE

 Address:
 12200 NUNN RD 80
 Address:
 12200 VONN RD, #2202

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 LARGO, FL 33774

 $\label{eq:title:Title:Title:TD} \textit{Title:} \qquad \textit{TD} \qquad \textit{(X) Change () Addition}$ 

 Name:
 BERG, BEVERLY
 Name:
 HARRIGAN, PATRICK

 Address:
 12200 VONN RD 2306
 Address:
 12200 VONN RD, #1202

 City-St-Zip:
 LARGO, FL 337743404
 City-St-Zip:
 LARGO, FL 33774

Title: D ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 KAZEN, JEAN
 Name:
 LEMANSKI, PATRICIA

 Address:
 12200 VONN RD 7C
 Address:
 12200 VONN RD, #1205

 City-St-Zip:
 LARGO, FL 337743404
 City-St-Zip:
 LARGO, FL 33774

 $\label{eq:title: VP () Delete} Title: \qquad \qquad D \qquad \qquad (X) \ Change \ (\ ) \ Addition$ 

 Name:
 EBBERT, JOSÉPHINE
 Name:
 EBBERT, JOSÉPHINE

 Address:
 12200 VONN RD 5A
 Address:
 12200 VONN RD, #5A

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 LARGO, FL 33774

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 LUMMIS, GORDON

 Address:
 Address:
 12200 VONN RD., #2C

 City-St-Zip:
 City-St-Zip:
 LARGO, FL 33774

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: LOUIS SAUR PD 03/25/2009