2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 739309

Entity Name: RESORT VILLAS CONDOMINIUM ASSOCIATION NO. 1, INC.

Current Principal Place of Business:

2177 SE OCEAN
STUART, FL 34996 US

New Principal Place of Business:

Current Mailing Address:

2177 SE OCEAN
STUART, FL 34996 US

New Mailing Address:

FEI Number: 59-1796263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAZMIER, TIMOTHY D
2177 SE OCEAN
STUART, FL 34996 US

Name and Address of New Registered Agent:

KAZMIER, TIMOTHY D MGR.
2177 SE OCEAN
STUART, FL 34996 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: TIMOTHY D. KAZMIER 04/22/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SQUADRITO, JOE
Address: 2177 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: VPSD ( ) Delete
Name: VIAPIANA, VALERIE
Address: 2177 SE OCEAN
City-St-Zip: STUART, FL 34996

Title: TD ( ) Delete
Name: CORNELL, THEODORE
Address: 2177 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete
Name: RAMOS, MARIE A
Address: 2177 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete
Name: KEHLE, JOHN
Address: 2177 SE OCEAN BLVD.
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: SQUADRITO, JOE
Address: 2177 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: PD (X) Change ( ) Addition
Name: VIAPIANA, VALERIE
Address: 2177 SE OCEAN
City-St-Zip: STUART, FL 34996

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

Title: SD (X) Change ( ) Addition
Name: LAROCCO, CHARLES
Address: 2177 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

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

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: TIMOTHY D. KAZMIER MGR. 04/22/2009
Electronic Signature of Signing Officer or Director Date