2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# 741229

Entity Name: VILLA CAPRI ASSOCIATION, INC.

Current Principal Place of Business:

2828 JACKSON ST
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

PO BOX 151845
CAPE CORAL, FL 33915

New Mailing Address:

1319 MIRAMAR ST
STE 101
CAPE CORAL, FL 33904

FEI Number: 59-1556592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZUNINO, PAOLA
C/O GPM INC
2799 DEL PRADO BLVD
CAPE CORAL, FL 33903 US

Name and Address of New Registered Agent:

ZUNINO, PAOLA
C/O GPM INC
1319 MIRAMAR ST STE 101
CAPE CORAL, FL 33904 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: PAOLA ZUNINO 03/04/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: DUMAS, JESSIE
Address: 2828 JACKSON ST N
City-St-Zip: FORT MYERS, FL 33901

Title: VPD ( ) Delete
Name: WOOD, JAMES
Address: 2828 JACKSON ST D7
City-St-Zip: FORT MYERS, FL 33901

Title: SD ( ) Delete
Name: FLADOR, JOYCE
Address: 2828 JACKSON ST #N-2
City-St-Zip: FORT MYERS, FL 33901

Title: PD ( ) Delete
Name: NOVAK, FRANK
Address: 2828 JACKSON ST I-6
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete
Name: SAYRE, WINNETTA
Address: 2828 JACKSON ST K1
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: RIVERA, RICHARD
Address: 2828 JACKSON ST #H-6
City-St-Zip: FORT MYERS, FL 33901

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

Title: D (X) Change ( ) Addition
Name: BRADY, CAROL
Address: 2828 JACKSON ST J6
City-St-Zip: FORT MYERS, FL 33901

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: FRANK NOVAK PRES 03/04/2009
Electronic Signature of Signing Officer or Director — Date