2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743142

FILED Apr 24, 2009 Secretary of State

Entity Name: VILLA NOVA CONDOMINIUM ASSOCIATION, INC.

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

181 CENTER ROAD VENICE, FL 34285 US

Current Mailing Address: New Mailing Address:

181 CENTER ROAD VENICE, FL 34285 US

FEI Number: 59-2116613 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:

ARGUS MGMT OF VENICE

181 CENTER ROAD

VENICE, FL 34285 US

ARGUS MANAGEMENT OF VENICE, INC.

181 CENTER ROAD

VENICE, FL 34285 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: SHAUN O'GRADY, C.A.M. 04/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 STEVENS, DIAAWYNN
 Name:
 STEVENS, DILLWYNN

 Address:
 1697 NORTHMPTON
 Address:
 181 CENTER ROAD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34285 US

Title: VPD () Delete Title: VPD (X) Change () Addition Name: CORTER, ROBERT Name: CORTER, ROBERT

Address: 1736 BONITAS CIR. Address: 181 CENTER, ROBERT

City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34285 US

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

 Name:
 STARY, MARY
 Name:
 STARY, MARY

 Address:
 1727 BONITAS CIR.
 Address:
 181 CENTER ROAD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34285 US

 Name:
 BRECHT, HB
 Name:
 BRECHT, HB

 Address:
 1738 LAKESIDE DR
 Address:
 181 CENTER ROAD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34285 US

 Name:
 MITCHELL, BOB
 Name:
 MITCHELL, BOB

 Address:
 1695 NORTHAMPTON ST
 Address:
 181 CENTER ROAD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34285 US

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: SHAUN O'GRADY CAM 04/24/2009