2006 NOT-FOR-PROFIT CORPORATION

FILED Apr 03, 2006 8:00 am Secretary of State

ANNUAL REPORT

1. Entity Nam	MENT#7433 PSQUARE VILLAS		SOCIATION, I	NC.			04-03-2006	_	3 ****6	1.25
Principal Place 390 US 301 BRADENTON		430	ing Address D1 32ND ST W. A-2 ADENTON, FL 3420		1					
2. Principal F	Place of Business	3. M	ailing Address		**************************************					
Suite, Apt.	#, etc.	5	Suite, Apt. #, etc.			02012006	Chg-NP	CR2E037 (11/05)	
City & Stat	le		City & State			4. FEI Numbe 59-1950				plied For t Applicable
Zip	Country	Ž	Zip	Cou	intry		of Status Desired		.75 Add	itional
	6. Name and Address	of Current Registe	red Agent	1		7. Name and	Address of New R			
THOMPSO	ON, STEPHEN W				Name					
PORGES, 2200 MAN	HAMLIN, KNOWLES IATEE AVE W	S, PROUTY, PA			Street Addre	ess (P.O. Box Numbe	er is Not Acceptable	e)		
BRADENT	FON, FL 34205				City			FL	Zip Code	
8. The above	e named entity submits this	statement for the out	roose of changing its	s register	d office or rec	distered agent, or bot	h, in the State of Flo		iliar with	and accept
and obligati	tions of registered agent.									
SIGNATURE	Signature, typed or printed name of		T	-		equired when reinstating)		DATE		
-		5	9. Election Ca	mpaign F	inancing	\$5.00 May B Added to Fees		DATE lake check pa rida Departme		
SIGNATURE	Signature, typed or printed name of Filling Fee is \$61.2 Due by May 1, 200. OFFICE	5	9. Election Ca Trust Fund	mpaign F Contribut	inancing ion.	\$5.00 May Be Added to Fees		lake check parida Departme	TORS IN	10
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Teasurer And 20024223

Beelee, Jean #743361

390 301 BLVD. W # 12B

Bradenton, Le 31265