

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


FILED

03 SEP 22 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 744716**

1. Entity Name  
**MODERN VILLAS HOMEOWNER'S ASSOCIATION, INC.**



Principal Place of Business  
166 SPARROW DRIVE  
ROYAL PALM BEACH, FL 33411

Mailing Address  
166 SPARROW DRIVE  
ROYAL PALM BEACH, FL 33411

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country



4. FEI Number **59-0686296** Applied For  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

ROSARI, VINCENT N  
166 SPARROW DRIVE  
ROYAL PALM BEACH, FL 33411

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW FEE IS \$61.25 Initial or Amended UBR**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	FERRIN, VIVIAN	
STREET ADDRESS	188 NATCHEZ TR	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARJUCA, SIMONEL	
STREET ADDRESS	166 SPARROW DRIVE SUITE 7B	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILCOX, DOROTHY	
STREET ADDRESS	166 SPARROW DR, SUITE 7C	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	D	<input type="checkbox"/> Delete
NAME	SUTHERLAND, MADRIE	
STREET ADDRESS	388 LA MANCHA AVE	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DIFRANSISCO, HOLLY	
STREET ADDRESS	166 SPARROW DR #3A	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

*Handwritten signature/initials: Bg/zn*

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *M Sutherland*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/18/03 661-790-5857  
Date Daytime Phone #

*M. Sutherland*

CR2E037 (10/02)