

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748631

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** VILLA MILAN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10540 77TH TERRACE N.  
SEMINOLE, FL 33772 US

**New Principal Place of Business:**

**Current Mailing Address:**

1301 SEMINOLE BLVD.  
SUITE 110  
LARGO, FL 33770 US

**New Mailing Address:**

**FEI Number:** 59-1946336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUALIFIED PROPERTY MANAGEMENT, INC.  
5901 US 19  
SUITE Q  
NEW PORT RICHEY, FL 34652 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HEARNDEN, MICHAEL  
Address: 10530 77 TERR N. #121  
City-St-Zip: SEMINOLE, FL 33772

Title: TD  
Name: CICCARELLI, GERALDINE  
Address: 10530 77 TERR N., #307  
City-St-Zip: SEMINOLE, FL 33772

Title: SD  
Name: GOOKIN, MARLENE  
Address: 10540 77 TERR N., #130  
City-St-Zip: SEMINOLE, FL 33772

Title: VP  
Name: DE RUSSO, LINDA  
Address: 10540 77 TERR N., #320  
City-St-Zip: SEMINOLE, FL 33772

Title: D  
Name: THERIAULD, MAURICE  
Address: 10540 77 TERR N., #227  
City-St-Zip: SEMINOLE, FL 33772

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL HEARNDEN

PD

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date