

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752961

FILED
Mar 22, 2005
Secretary of State

Entity Name: THE VILLAS OF ORLANDO, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-2026280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W SR 434 STE. 5000
LONGWOOD, FL 32779 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 () Delete
Name: MILEWSKI, AILEEN
Address: 525 S. CONWAY RD. #139
City-St-Zip: ORLANDO, FL 32807

Title: VPD () Delete
Name: REXROAT, JAMES
Address: 1213 OREGON STREET
City-St-Zip: ORLANDO, FL 32803

Title: SD () Delete
Name: SKELLEY, THOMAS
Address: 525 S. CONWAY RD. #230
City-St-Zip: ORLANDO, FL 32807

Title: TD () Delete
Name: IVY, SCOTT J
Address: 525 S. CONWAY RD. #203
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: BENNETT, TINA
Address: 525 S. CONWAY RD. #30
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: ARBONA, MERCEDES
Address: 525 S CONWAY RD #105
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: SZABO, ALBERT
Address: 525 S CONWAY RD #221
City-St-Zip: ORLANDO, FL 32803

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AILEEN MILEWSKI

PD

03/22/2005

Electronic Signature of Signing Officer or Director

Date