

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754658

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** LAVILLA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2930 DEL PRADO BLVD S SUITE B  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

4508 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33914 US

**Current Mailing Address:**

2930 DEL PRADO BLVD S SUITE B  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

4508 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33914 US

**FEI Number:** 59-2266154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SORENSEN, CATHY J  
SORENSEN REALTY, INC.  
2930 DEL PRADO BLVD, S SUITE B  
CAPE CORAL, FL 33904 US

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

PANNO, DOMENIC PRES.  
4508 SANTA BARBARA BLVD.  
#103  
CAPE CORAL, FL 33914 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: DOMENIC PANNO

04/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PANNO, DOMENIC  
Address: 4508 SANTA BARBARA BLVD #103  
City-St-Zip: CAPE CORAL, FL 33914

Title: V-PR  
Name: BAXTER, JAMES D  
Address: 4508 SANTA BARBARA BLVD. #104  
City-St-Zip: CAPE CORAL, FL 33914

Title: TRES  
Name: BURNS, WENDY  
Address: 4508 SANTA BARBARA BLVD. #104  
City-St-Zip: CAPE CORAL, FL 33914

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: DOMENIC PANNO

PRES

04/16/2010

Electronic Signature of Signing Officer or Director

Date