

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757177

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** VILLAS OF PALM BEACH PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4969 SARATOGA RD.  
WEST PALM BEACH, FL 33415 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 16944  
WEST PALM BEACH, FL 33416 US

**New Mailing Address:**

**FEI Number:** 65-0046048

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER & POLIAKOFF, P.A.  
625 NORTH FLAGLER DRIVE  
7TH FLOOR  
WEST PALM BEACH, FL 33401 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: T  
Name: KHAN, SHAUKAT  
Address: P O BOX 16944  
City-St-Zip: WPB, FL 33416

Title: P  
Name: ISLAM, MIR  
Address: P O BOX 16944  
City-St-Zip: WEST PALM BEACH, FL 33416

Title: VP  
Name: AZSAL, MUSARRAT  
Address: P O BOX 16944  
City-St-Zip: WEST PALM BEACH, FL 33416

Title: S  
Name: PINEROA, MARIA  
Address: P O BOX 16944  
City-St-Zip: WEST PALM BEACH, FL 33416

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: SHAUKAT KHAN

T

04/21/2011

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

\_\_\_\_\_  
Date