

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759104

FILED
Apr 24, 2008
Secretary of State

Entity Name: VILLAGE WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5258 AVENIDA NAVARRA
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

2477 STICKEY POINTE RD
118A
SARASOTA, FL 34231 US

New Mailing Address:

63 SARASOTA CENTER BLVD
104
SARASOTA, FL 34240 US

FEI Number: 59-2254402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MGMT.
2477 STICKNEY POINT RD #118A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

ADI PROPERTY MGMT.
63 SARASOTA CENTER BLVD
104
SARASOTA, FL 34240 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: JAMES P. FESTA

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: RACK, BETTY
Address: 72 CAPENTER'S RIDGE
City-St-Zip: CINCINNATI, OH 45241

Title: T () Delete
Name: JORDIN, MICHAEL
Address: 5256 AVENIDA NAVARRA
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: HARRISON, JOHN
Address: 5053 DEVAN BLVD STE 117
City-St-Zip: SARASOTA, FL 34242

Title: P () Delete
Name: JOBSON, DONNA
Address: 4113 BLACK POOL RD.
City-St-Zip: ROCKVILLE, MD 20853

Title: D () Delete
Name: GREEN, JOSEPH
Address: 305 FRANKLIN STREET
City-St-Zip: JOHNSTOWN, PA 15407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RACK, BETTY
Address: 72 CAPENTER'S RIDGE
City-St-Zip: CINCINNATI, OH 45241

Title: V/T (X) Change () Addition
Name: JORDIN, MICHAEL
Address: 5256 AVENIDA NAVARRA
City-St-Zip: SARASOTA, FL 34242

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

Title: P (X) Change () Addition
Name: NICKOLS, BARBARA
Address: 5250 AVENIDA NAVARRA
City-St-Zip: SARASOTA, FL 34242

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARBARA NICHOLS

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date