


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Feb 08, 2006 8:00 am**  
**Secretary of State**

02-08-2006 90011 029 \*\*\*\*61.25

<b>DOCUMENT # 760526</b>	
1. Entity Name <b>VILLA ESPANA ASSOCIATION, INC.</b>	

Principal Place of Business <b>C/O CANTRELL, C.M. 3176 VILLA ESPANA TR. MELBOURNE FL 32935 US</b>	Mailing Address <b>3176 VILLA ESPANA TRL MELBOURNE FL 32935 US</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/05)

City & State	City & State	4. FEI Number <b>59-2649303</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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**6. Name and Address of Current Registered Agent**

**CANTRELL, C.M.  
3176 VILLA ESPANA TR.  
MELBOURNE FL 32935**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
City **FL** Zip Code \_\_\_\_\_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOWELL, CHARLES <input type="checkbox"/> Delete 1900 VILLA ESPANA TRAIL MELBOURNE FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REYNOLDS, STEVE <input type="checkbox"/> Delete 1740 VILLA ESPANA TRAIL MELBOURNE FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CANTRELL, MARSHAL <input type="checkbox"/> Delete 3251 VILLA ESPANA TR. MELBOURNE FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOYD, MONICA <input type="checkbox"/> Delete 3226 VILLA ESPANA TR. MELBOURNE FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEIER, FRITZ <input type="checkbox"/> Delete 1945 VILLA ESPANA TR. MELBOURNE FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THANI, SHEELAGH <input type="checkbox"/> Delete 3275 VILLA ESPANA TRAIL MELBOURNE FL 32935

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CANTRELL, C. MARSHALL (SPELLING)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.