

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765375

FILED
Aug 27, 2007
Secretary of State

Entity Name: VILLA DEL SEIS OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

674 OSCEOLA AVE
WINTER PARK, FL 327891456

New Principal Place of Business:

672 OSCEOLA AVE
WINTER PARK, FL 32789 US

Current Mailing Address:

674 OSCEOLA AVE
WINTER PARK, FL 327891456

New Mailing Address:

227 W NEW ENGLAND AVE.
A
WINTER PARK, FL 32789 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHURA, LYNN C
674 OSCEOLA AVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MARINO, CATHY
227 W NEW ENGLAND AVE.
A
WINTER PARK, FL 32789 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: CATHY MARINO

08/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHURA, LYNN C
Address: 674 OSCEOLA AVENUE
City-St-Zip: WINTER PARK, FL 00000,

Title: VPD () Delete
Name: HELGESON, BYRON
Address: 670 OSCEOLA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: STD () Delete
Name: CORCORAN, ANNE
Address: 672 OSCEOLA AVENUE
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WARREN, LINDA
Address: 678 OSCEOLA AVE.
City-St-Zip: WINTER PARK, FL 32789 US

Title: VPD (X) Change () Addition
Name: HELGESON, BYRON
Address: 670 OSCEOLA AVE.
City-St-Zip: WINTER PARK, FL 32789 US

Title: STD (X) Change () Addition
Name: CORCORAN, ANNE
Address: 672 OSCEOLA AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

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: ANNE CORCORAN

ST/D

08/27/2007

Electronic Signature of Signing Officer or Director

Date