

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765500

FILED
Mar 19, 2009
Secretary of State

Entity Name: VILLAS AT RIVER RUN COMDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 OXBOW DRIVE
LABELLE, FL 339751812

New Principal Place of Business:

1033 VILLA DR.
LABELLE, FL 33935

Current Mailing Address:

P. O. BOX 1812
LABELLE, FL 339751812

New Mailing Address:

FEI Number: 59-2459665 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILLARD, BARBARA
381 SR 80 WEST
PO BOX 2298
LABELLE, FL 339752298 US

Name and Address of New Registered Agent:

WILLARD, BARBARA
381 SR 80 WEST
LABELLE, FL 33935 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: _____

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: TYNER, JAMES
Address: 100 OXBOW DR #A 202
City-St-Zip: LABELLE, FL 33935

Title: PD () Delete
Name: QUAYLE, ROSE,
Address: 100 OXBOW DR #A-204
City-St-Zip: LABELLE, FL 33935

Title: D () Delete
Name: BISEK, DON
Address: 100 OXBOW DR, #B201
City-St-Zip: LABELLE, FL 33935

Title: TD () Delete
Name: COOK, CONNIE
Address: 100 OXBOW DR #D-102
City-St-Zip: LABELLE, FL 33935

Title: D () Delete
Name: TORNABENE, ANGELO
Address: 100 OXBOW DR #D-202
City-St-Zip: LABELLE, FL 33935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: TYNER, JAMES
Address: 1033 VILLA DRIVE #A-202
City-St-Zip: LABELLE, FL 33935

Title: PD (X) Change () Addition
Name: QUAYLE, ROSE
Address: 1033 VILLA DR #A-204
City-St-Zip: LABELLE, FL 33935

Title: D (X) Change () Addition
Name: BISEK, DON
Address: 1069 VILLA DR #B-201
City-St-Zip: LABELLE, FL 33935

Title: TD (X) Change () Addition
Name: COOK, CONNIE
Address: 1070 VILLA DR #D-102
City-St-Zip: LABELLE, FL 33935

Title: D (X) Change () Addition
Name: TORNABENE, ANGELO
Address: 1070 VILLA DR #D-202
City-St-Zip: LABELLE, FL 33935

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: ROSE QUAYLE

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date