

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # 765846

1. Entity Name

VILLAS ON GOLDEN BEACH, INC.



Principal Place of Business

C/O FRANK EBETINO
800 GOLDEN BEACH BLVD. SOUTH
VENICE FL 34285-3326

Mailing Address

C/O STEWART BUSINESS SERV
1224 RIDGEWOOD AVE
VENICE FL 34292
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-2376237

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWARTS
ATT: SANDRA R MACINTYRE
1224 RIDGEWOOD AVE
VENICE FL 34292-1939

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	D	<input type="checkbox"/> Delete
NAME	BECKER, ALLEN	
STREET ADDRESS	800 GOLDEN BEACH BLVD	
CITY-ST-ZIP	VENICE FL 34285	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	KURTZO, LAWRENCE	
STREET ADDRESS	800 GOLDEN BEACH BLVD	
CITY-ST-ZIP	VENICE FL 34285	
TITLE	PD	<input type="checkbox"/> Delete
NAME	EBETINO, FRANK	
STREET ADDRESS	800 GOLDEN BEACH BLVD	
CITY-ST-ZIP	VENICE FL 34285	
TITLE	TS	<input type="checkbox"/> Delete
NAME	WOOD, LEUANNE	
STREET ADDRESS	800 GOLDEN BEACH BLVD.S.	
CITY-ST-ZIP	VENICE FL	
TITLE	AST	<input type="checkbox"/> Delete
NAME	MACINTYRE, SANDRA R	
STREET ADDRESS	1224 RIDGEWOOD AVE	
CITY-ST-ZIP	VENICE FL 34292	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	000000307267	
CITY-ST-ZIP	04/15/05-80049-002 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

Frank E. Ebetino FRANK E. EBETINO PRES-12-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #