

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766131

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** WESTGATE VACATION VILLAS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5601 WINDHOVER DRIVE  
ORLANDO, FL 328197905

**New Principal Place of Business:**

**Current Mailing Address:**

5601 WINDHOVER DRIVE  
ORLANDO, FL 328197905

**New Mailing Address:**

**FEI Number:** 59-2250105

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MICHAEL, MARDER  
TRADE CENTRE SOUTH, STE 700  
100 W CYPRESS CREEK RD  
FT. LAUDERDALE, FL 33309 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PTD  
**Name:** SIEGEL, DAVID A  
**Address:** 5601 WINDHOVER DR  
**City-St-Zip:** ORLANDO, FL

**Title:** DS  
**Name:** WALTRIP, MARK A  
**Address:** 5601 WINDOVER DR  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** T  
**Name:** DUGAN, THOMAS F  
**Address:** 5601 WINDOVER DR  
**City-St-Zip:** ORLANDO, FL 32819

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS F DUGAN

TREA

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date