

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767526

FILED  
Jan 16, 2006  
Secretary of State

**Entity Name:** THE REGENCY VILLAS CONDOMINIUM, INCORPORATED

**Current Principal Place of Business:**

312 S.E. 17TH STREET  
SECOND FLOOR  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

312 S.E. 17TH STREET  
SECOND FLOOR  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:** 20-1215041      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SAAVEDRA, DAMASO W ESQ  
312 S.E. 17TH STREET  
SECOND FLOOR  
FORT LAUDERDALE, FL 33316 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: PD ( ) Delete  
Name: SAAVEDRA, DAMASO W  
Address: 312 S.E. 17TH STREET, SECOND FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DV ( ) Delete  
Name: VERMEULEN, BLAINE  
Address: 240 HIGHLAND STREET  
City-St-Zip: MOUNT DORA, FL 32757

Title: STD ( ) Delete  
Name: HERMANN, LISA K  
Address: 312 S.E. 17TH STREET, SECOND FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAMASO W. SAAVEDRA

PD

01/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date