

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006 8:00 am
Secretary of State

04-24-2006 90447 048 ****61.25

DOCUMENT # 768756			
1. Entity Name VILLA MANILA CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 5 N. 17TH AVE #602 JACKSONVILLE BEACH, FL 32250 US		Mailing Address 5 N. 17TH AVE #602 JACKSONVILLE BEACH, FL 32250 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2348892		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FOSTER, MARIE 5 N. 17TH AVE. #602 JACKSONVILLE BEACH, FL 32250		7. Name and Address of New Registered Agent Name: Sharon Fisher Street Address (P.O. Box Number is Not Applicable): 1008 Oceanwood Drive N414N City: Neptune Beach FL Zip Code: 32266	
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: <i>Sharon Fisher</i>		DATE: 4/19/06	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CARBALLO, MARITZA 1819 SABAL OAK WAY JACKSONVILLE, FL 32256 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD Carbello maritza 1819 Sabal Oak Way Jacksonville, FL 32250 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD LAZO, DENISE 5 NORTH 17TH AVENUE, #201 JACKSONVILLE BEACH, FL 32250 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Lazo, Denise 5 N. 17th Ave #201 Jacksonville Bch, FL 32250 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FOSTER, MARIE 5 N. 17TH AVE. #602 JACKSONVILLE BEACH, FL 32250 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD Foster, Marie 5 N. 17th Ave. #602 Jacksonville Bch, FL 32250 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DEL ROSARIO, JESSIE 5 N. 17TH AVE. #302 JACKSONVILLE BEACH, FL 32250 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD mildred Salvador 5 N. 17th Ave Jacksonville Bch, FL 32250 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Salvador, mildred 5 N. 17th Ave, #402 Jacksonville Bch, FL 32250 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Sharon Fisher, CAM</i>		DATE: 4/19/06 904-242-2655	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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