



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2006 8:00 am
Secretary of State

05-15-2006 90038 021 ****61.25

DOCUMENT # 769086 1. Entity Name VILLAS OF WESTRIDGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 3968 N MONROE ST TALLAHASSEE, FL 32303 US				Mailing Address P.O. BOX 180657 TALLAHASSEE, FL 32318 US	
2. Principal Place of Business 1827 Crane Dr Suite, Apt. #, etc. Tallahassee, FL 32303 City & State		3. Mailing Address P.O. Box 2373 Suite, Apt. #, etc. Tallahassee, FL 32316 City & State			
Zip 		Country 		04282006 Chg-NP CR2E037 (4/06)	
4. FEI Number 59-2737946				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SBORDONE, LEANN 3968 N MONROE ST TALLAHASSEE, FL 32303			7. Name and Address of New Registered Agent Name CLAUDIU BUCUR, President of HOA Street Address (P.O. Box Number is Not Acceptable) 1827 Crane Dr <i>not a registered agent</i> Tallahassee, FL 32303 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 <u><i>Claudin Bucur, CLAUDIU BUCUR</i></u> DATE <u><i>05/10/06</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOTEL, BOB 1916 MAYMEADOW LANE TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT CLAUDIU BUCUR 1827 Crane Dr Tallahassee, FL 32303	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FULLER, DENNIS 556 N MONROE 5TH TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER URSULA KELLER 1827 Crane Dr. Tallahassee, FL 32303	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SBORDONE, LEANN 3968 N MONROE ST TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY DIANA SNYDER 4020 Alameda Dr. Tallahassee, FL 32317	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>Claudin Bucur, CLAUDIU BUCUR</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u><i>05/10/06</i></u> Daytime Phone # <u><i>850-391-4369</i></u>		