

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769671

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** VILLAS OF ST. THOMAS, II, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8730 THOMAS DR.  
PANAMA CITY BCH, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

8730 THOMAS DR.  
PANAMA CITY BCH, FL 32408 US

**New Mailing Address:**

**FEI Number:** 59-2364808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSH, MARIE A  
% ST THOMAS SQ. MOA  
8730 THOMAS DR  
PANAMA CITY BEACH, FL 32408 US

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

RUSH, MARIE A  
ST THOMAS SQ. MOA  
8730 THOMAS DR  
PANAMA CITY BEACH, FL 32408 US

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:

01/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WEISENSEL, HERB  
Address: 5640 CHESTATEE LANDING DR  
City-St-Zip: GAINESVILLE, GA 30506 US

Title: VPD  
Name: TRAVERS, MARISA  
Address: 8730 THOMAS DR. #212  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: STD  
Name: STOLFA, PHILLIP  
Address: 7775 CHARLESTON OAKS DR.  
City-St-Zip: DAPHNE, AL 36526 US

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: HERB WEISENSEL

PD

01/05/2012

Electronic Signature of Signing Officer or Director

Date