2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 05, 2005 8:00 am Secretary of State

05-05-2005 90113 027 ****61 25

DOCUMENT # N0100003564 1. Entity Name VILLAS II AT CEDAR HAMMOCK ASSOCIATION, INC.									U	is-us-2005 <u>(</u>	90113 (<i>927 ***</i> **6	1.25
BUTTONWOOD WAY P.				Mailing Address P.O. BOX 110156 NAPLES, FL 34108				50049574					
Principal Place of Business 3. Mi				Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				0501200	15 C	hg-NP	CR2E	037 (10/03)	
City & Stat	te		Ci	City & State				4. FEI Nui 59-3	mber 72505	55			oplied For
Zip Country			Zip			intry	5. Certificate of Status Desir				Desired S8.75 Additional Fee Required		
6. Name and Address of Current			l Registen	ed Agent		7. Name and Address of New Registered Agent							
•						Name					og.oto.ou	- Agoin	
WHITE, WILLIAM D 2310 DELLA DR NAPLES, FL 34117				Street Addres				ss (P.O. Box Number is Not Acceptable)					
	•	•				City					FI	L Zip Coo	18
Filing Fee is \$61.25 9. Election Cam Due by September 7, 2005 Trust Fund C						inancing		\$5.00 Ma	y Be ses	Flori	ida Depa	ck payable t	tate
10.	AS	OFFICERS AND D	RECTORS		11.		. 	ADDITIONS/	CHANG	ES TO OFFICE	RS AND D		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WHITE, V 2310 DEL	VILLIAM D LA DR FL 34117		Delete								☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3716 BUT	Y, DONALD TONWOOD WAY FL 341123348	- +	☐ Delete			DF 1+0 371 Na	4 13 47	y, I Fion	Sonald wood W 34/12	Ay	Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	3748 BUT	T, ELEEN ITONWOOD WAY FL 341123348	_	☐ Delete			D V TA 370	rp GG FR1	ton a		7	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		K, MIKE TONWOOD WAY FL 341123348		Debute			5PE 527	Hes, P	AVU Le Co		e	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	_ Delete			13. 12.	AS eghned Come	ί, Β.		,	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete								☐ Change	Addition
of the cor	i on this repo rporation or t	e information supplied wit rt or supplemental report i he receiver or trustee emp achment with an address,	s true and lowered to	execute this report	my signat t as requir	ure shall t	1978 the 8	ame iegal e	ffact as	if made under o	ath• that l	am an officer	or director

BETTINA MEGHNAGI

Fortun Sighiagi, Harrager signature and treeston process on direction

SIGNATURE: