

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007053

FILED  
Apr 03, 2005  
Secretary of State

**Entity Name:** VILLAS OF SPANISH SPRINGS CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1100 MAIN STREET  
THE VILLAGES, FL 32159

**New Principal Place of Business:**

1020 LAKE SUMTER LANDING  
THE VILLAGES, FL 32162

**Current Mailing Address:**

1100 MAIN STREET  
THE VILLAGES, FL 32159

**New Mailing Address:**

1020 LAKE SUMTER LANDING  
THE VILLAGES, FL 32162

FEI Number: 04-3672485

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LITTLE, CRAIG W  
1100 MAIN STREET  
THE VILLAGES, FL 32159 US

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

SKATES, JEFFREY P  
1028 LAKE SUMTER LANDING  
THE VILLAGES, FL 32162 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: JEFFREY P. SKATES

04/03/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MATHEWS, D W  
Address: 1100 MAIN STREET  
City-St-Zip: THE VILLAGES, FL 32159

Title: D ( ) Delete  
Name: MORSE, MARK G  
Address: 1100 MAIN STREET  
City-St-Zip: THE VILLAGES, FL 32159

Title: D ( ) Delete  
Name: PARR, JENNIFER  
Address: 1100 MAIN STREET  
City-St-Zip: THE VILLAGES, FL 32159

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

Title: D (X) Change ( ) Addition  
Name: MATHEWS, D W  
Address: 1020 LAKE SUMTER LANDING  
City-St-Zip: THE VILLAGES, FL 32162

Title: D (X) Change ( ) Addition  
Name: MORSE, MARK G  
Address: 1020 LAKE SUMTER LANDING  
City-St-Zip: THE VILLAGES, FL 32162

Title: D (X) Change ( ) Addition  
Name: PARR, JENNIFER L  
Address: 1020 LAKE SUMTER LANDING  
City-St-Zip: THE VILLAGES, FL 32162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: D.W. MATHEWS

D

04/03/2005

Electronic Signature of Signing Officer or Director

Date