

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01186

FILED
Apr 09, 2010
Secretary of State

Entity Name: VILLAGE DES PINS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7964 TIMBERWOOD CIRCLE
SARASOTA, FL 34238

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY POINT ROAD
118A
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 59-2612052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC.
2477 STICKNEY POINT ROAD
118A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: LECCESE, JUDY
Address: 28 AUGUSTUS RD
City-St-Zip: WALTHAM, MA 24552 US

Title: PD
Name: SHAFFER PETER
Address: 2477 STICKNEY POINT DR 118A
City-St-Zip: SARASOTA, FL 34231

Title: SD
Name: JACOBS, JANE
Address: 268 WEST FAIRVIEW WAY
City-St-Zip: PALATINE, IL 60067

Title: D
Name: PETER, ZACHAR
Address: 920 KILLEEN AVENUE
City-St-Zip: OTTAWA, ON K2A2X9 CA

Title: VPD
Name: SAKO, DOLORES
Address: 3617 PINE ST CT
City-St-Zip: SARASOTA, FL 34238 US

Title: BD
Name: PRICE, STEVE
Address: 3622 PINE COURT DR
City-St-Zip: SARASOTA, FL 34238 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: PETER SHAFFER

PD

04/09/2010

Electronic Signature of Signing Officer or Director

Date