


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000001342 1. Entity Name VILLA GRANDE HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business DORRILL MGMT GROUP 5672 STRAND COURT, STE 1 NAPLES, FL 34110	Mailing Address DORRILL MGMT GROUP 5672 STRAND COURT, STE 1 NAPLES, FL 34110
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01062006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0584462	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DORRILL, W. NEIL 5672 STRAND COURT, STE 1 NAPLES, FL 34110

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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 *[Signature]* DATE 1/16/06

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reconstituting)

**Filing Fee Is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SLAVICH, BILL 5660 STRAND CT. NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MELSON, RICK 5660 STRAND CT. NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT MELSON, AMY 5660 STRAND CT. NAPLES, FL 34110
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02/06/06-80021-025 61.25

DO NOT WRITE IN THIS SPACE

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 to this address, with all other, duly empowered.

SIGNATURE: *[Signature]* DATE 1/24/06 DAYTIME PHONE # 239.592.9115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR