2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005582

FILED Jan 08, 2006 Secretary of State

Entity Name: THE VILLAS AT BALLAST POINT TOWNHOUSES ASSOCIATION, INC.

	Principal Plac	e of Business:	New Principal Place of Business:
3132 SAN TAMPA, F	ITORINI CT FL 33611		3115 SANTORINI CT TAMPA, FL 33611
Current N	Mailing Addre	ess:	New Mailing Address:
3132 SAN TAMPA, F	ITORINI CT FL 33611		3115 SANTORINI CT TAMPA, FL 33611
FEI Numbei	r: 14-1877300	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address of New Registered Agent:
3132 SAN	RANDY T BALLAS PC ITORINI CT FL 33611 US	INT - HOA	CLARKE, RODDY D VILLAS AT BALLAS POINT - HOA 3115 SANTORINI CT TAMPA, FL 33611 US
	e named entity te of Florida.	submits this statement for the	ne purpose of changing its registered office or registered agent, or both,
SIGNATU	IRE: RODDY	CLARKE	01/08/2006
	Electro	onic Signature of Registered	Agent Date
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	GIVENS, CHE 3130 SANTOI	RINI CT	Title: () Change () Addition Name: Address: City-St-Zip:
Name: Address: City-St-Zip: Title: Name: Address:	GIVENS, CHR 3130 SANTOI TAMPA, FL 3 V (MORALES, L 3131 SANTOI	ris RINI CT 3611) Delete ESTER RINI CT	Name: Address:
Name: Address:	GIVENS, CHE 3130 SANTOI TAMPA, FL 3 V (MORALES, LI 3131 SANTOI TAMPA, FL 3 T (CLARKE, RO 3132 SNATOI	RIS RINI CT 3611) Delete ESTER RINI CT 3611) Delete DDY RINI CT.	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	GIVENS, CHE 3130 SANTOI TAMPA, FL 3 V (MORALES, LI 3131 SANTOI TAMPA, FL 3 T (CLARKE, RO 3132 SNATOI TAMPA, FL 3	RIS RINI CT 3611) Delete ESTER RINI CT 3611) Delete DDY RINI CT. 3611) Delete NA RINI CT.	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: T (X) Change () Addition Name: CLARKE, RODDY Address: 3132 SANTORINI CT.

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: RODDY CLARKE T 01/08/2006