2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007409

FILED Apr 13, 2009 Secretary of State

Entity Name: VILLA DEL SOL AT MEADOW WOODS CONDOMINIUM NO. 2, ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

C/O HARA MANAGEMENT, INC 931 S. SEMORAN BLVD 931 S SEMORAN BLVD #214 SUITE #214

WINTER PARK, FL 32792 WINTER PARK, FL 32792

 Current Mailing Address:
 New Mailing Address:

 C/O HARA MANAGEMENT, INC
 931 S. SEMORAN BLVD

931 S SEMORAN BLVD #214 SUITE #214 WINTER PARK, FL 32792 WINTER PARK, FL 32792

FEI Number: 65-1166223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARA MANAGEMENT, INC.
931 S SEMORAN BLVD #214
WINTER PARK, FL 32792 US
HARA MANAGEMENT, INC.
931 S SEMORAN BLVD
SUITE #214

WINTER PARK, FL 32792 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: ROBERT HARA 04/13/2009

Electronic Signature of Registered Agent Date

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

itle: DP () Delete Title: PD (X) Change () Addition

 Name:
 GUNTIE, MATT
 Name:
 GUMTIE, MATT

 Address:
 1612 GOLDEN POPPY CT
 Address:
 2833 ATHERTON DRIVE

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

Title: DST () Delete Title: VPD (X) Change () Addition

 Name:
 PEREZ, HERMAN
 Name:
 PEREZ, HERMAN E

 Address:
 522 VILLA DEL SOL CIRCLE #101
 Address:
 P.O. BOX 514

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 TOA ALTA, PA 00954

Title: DST () Delete Title: STD (X) Change () Addition

 Name:
 BONILLA, MILDRED
 Name:
 BONILLA, MILDRED

 Address:
 522 VILLA DEL SOL CIR #103
 Address:
 522 VILLA DEL SOL CIR #103

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

I hereby certify that the information supplied with this filing does not qualify 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: MATT GUMTIE PRES 04/13/2009