2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000008405

1. Entity Name

THE VARESE CONDOMINIUM ASSOCIATION, INC.



FILED Jan 17, 2008 08:00 AM Secretary of State

Principal Place of Business

1601 CURLEW AVENUE NAPLES, FL 34112 Mailing Address

1626 AMITY RD RYDAL, PA 19046



DO NOT WRITE IN THIS SPACE

01152008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 02-0695298

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAY, SUSAN 2035 WAHOO COURT NAPLES, FL 34102

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	named entity submits this statement for the patients of registered agent.	ourpose of changing its registered office	or re	egistered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agent sig	net ra	ractivities (when refratation)	DATE
	Organization, typed or printed here or registered agent and me	паррисация. (1901с. педваяна пункая	i miore	required wites (with teating)	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. (\$5.00 May Be Added to Fees	U00000787780 01/18/08-80014-886 61.25
10.	OFFICERS AND DIRECTORS				
TITLE Name Street address City-St-Zip	T HENRY, COULSTON 1626 AMITY RD RYDER, PA 19046				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GERRY, BARBARA ANN 5000 ROYAL MARGO WAY #336 MARCO ISLAND, FL 34154				
TITLE	S HILT BONNIE	1			

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 with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7/P

TITLE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2310 SKYLINE RANCH RD

3310 SKYLINE RANCH RD

RAPID CITY, SD 57701

RAPID CITY, SD 57701

HILT, JOE

oulston Henry

1/15/20 215-327-3357