

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008938

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: VILLA DEL SOL AT MEADOW WOODS CONDOMINIUM ASSOCIATION INC., NO. 4

## Current Principal Place of Business:

C/O HARA MANAGEMENT, INC.  
931 S. SEMORAN BLVD #214  
WINTER PARK, FL 32792

## New Principal Place of Business:

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

## Current Mailing Address:

C/O HARA MANAGEMENT, INC.  
931 S. SEMORAN BLVD #214  
WINTER PARK, FL 32792

## New Mailing Address:

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

FEI Number: 65-1166297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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:

Title: DP ( ) Delete  
Name: VIDAL, CLAUDIA  
Address: 527 VILLA DEL SOL CIRCLE, #202  
City-St-Zip: ORLANDO, FL 32824

Title: DVP ( ) Delete  
Name: GUMTIE, MATT  
Address: 1612 GOLDEN POPPY COURT  
City-St-Zip: ORLANDO, FL 32824

Title: DST ( ) Delete  
Name: RAMON, PITRE  
Address: 455 CHICAGO WOODS CIR  
City-St-Zip: ORLANDO, FL 32824

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: VIDAL, CLAUDIA L  
Address: 527 VILLA DEL SOL CIRCLE, #202  
City-St-Zip: ORLANDO, FL 32824

Title: VPD (X) Change ( ) Addition  
Name: GUMTIE, MATT  
Address: 2833 ATHERTON DRIVE  
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change ( ) Addition  
Name: PITRE, RAMON  
Address: 455 CHICAGO WOODS CIR  
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: CLAUDIA L. VIDAL

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date