

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005758

FILED
Apr 12, 2007
Secretary of State

Entity Name: VILLA TAMPANIA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

604 S. TAMPANIA AVE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

604 S. TAMPANIA AVE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 03-0522989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARTER, SANDRA
604 S. TAMPANIA AVE., UNIT D
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALL, HARRY
Address: 604 S. TAMPANIA AVE #C
City-St-Zip: TAMPA, FL 33609

Title: VP () Delete
Name: MCCARTER, SANDY
Address: 604 S. TAMPANIA AVE UNIT D
City-St-Zip: TAMPA, FL 33609

Title: T () Delete
Name: SALFARO, CARL
Address: 604 A TAMPANIA AVE #B
City-St-Zip: TAMPA, FL 33609

Title: S () Delete
Name: RIVIERA, HECTOR J
Address: 604 S. TAMPANIA AVE #A
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SCALFARO, FRANK
Address: 604 A TAMPANIA AVE #B
City-St-Zip: TAMPA, FL 33609

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SANDY MCCARTER

VP

04/12/2007

Electronic Signature of Signing Officer or Director

Date