

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006440

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** OLD PROGRESSO VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

715 NW 1ST AVE  
FORT LAUDERDALE, FL 33311 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 23253  
FORT LAUDERDALE, FL 33307

**New Mailing Address:**

**FEI Number:** 20-0158113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VALANCY, STEVENS S  
311 SE THIRD STREET  
FORT LAUDERDALE, FL 33316 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:** DP  
**Name:** BOYD, MARK  
**Address:** 709 NW 1ST AVE.  
**City-St-Zip:** FORT LAUDERDALE, FL 33311

**Title:** SD  
**Name:** WATHEY, NORMA  
**Address:** 715 NW 1ST AVE.  
**City-St-Zip:** FORT LAUDERDALE, FL 33311

**Title:** DT  
**Name:** CENTAMORE, KIMBERLEE  
**Address:** P.O.BOX 2030  
**City-St-Zip:** FORT LAUDERDALE, FL 33303

I hereby 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 all other like empowered.

**SIGNATURE:** KIMBERLEE CENTAMORE

DT

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date