

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007291

FILED
Feb 12, 2009
Secretary of State

Entity Name: VILLA TOSCANA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

224 CHANDLER ST.
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

224 CHANDLER ST.
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 83-0398171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YAMASAKI, KIYOSHI
224 CHANDLER ST.
CAPE CANAVERAL, FL 32920 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: PTD () Delete
Name: YAMASAKI, KIYOSHI
Address: 224 CHANDLER ST.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VSD () Delete
Name: DERRINGER, NANCY
Address: 218 CHANDLER ST.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: DERRINGER, GARY
Address: 218 CHANDLER ST.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: ROBERTS, ERIC
Address: 220 CHANDLER ST.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: KEEFE, DAN
Address: 222 CHANDLER ST.
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: KIYOSH YAMASAKI

PTF

02/12/2009

Electronic Signature of Signing Officer or Director

Date