

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008104

FILED
Jul 07, 2004
Secretary of State**Entity Name:** VILLA POSITANO NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**77 WEST WACKER DRIVE
SUITE 700
CHICAGO, IL 60601**New Principal Place of Business:****Current Mailing Address:**77 WEST WACKER DRIVE
SUITE 700
CHICAGO, IL 60601**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LYONS, RICHARD D ESQ.
25241 ELMENTARY WAY
SUITE 206
BONITA SPRINGS, FL 34135 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:** PD () Delete
Name: CURTO, RICHARD S
Address: 77 WEST WACKER DRIVE STE 700
City-St-Zip: CHICAGO, IL 60601**Title:** SVD () Delete
Name: CHOOKASZIAN, MICHAEL
Address: 77 WEST WACKER DRIVE STE 700
City-St-Zip: CHICAGO, IL 60601**Title:** VD () Delete
Name: DEWAR, JOHN R
Address: 77 WEST WACKER DRIVE STE 700
City-St-Zip: CHICAGO, IL 60601**Title:** ST () Delete
Name: DEWAR, JOHN R ASST.
Address: 77 WEST WACKER DRIVE STE 700
City-St-Zip: CHICAGO, IL 60601**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL CHOOKASZIAN

SVD

07/07/2004

Electronic Signature of Signing Officer or Director

Date