2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2010
Secretary of State

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Entity Name: LAS VILLAS DE ORLEANS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

308 S ORLEANS AVE
#4
TAMPA, FL 33606 US

New Principal Place of Business:

308 S ORLEANS AVE
#3
TAMPA, FL 33606 US

Current Mailing Address:

308 S ORLEANS AVE
#4
TAMPA, FL 33606 US

New Mailing Address:

527 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32602 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLEDSOE, NORMAN S ESQ
527 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32602 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
Name: BLEDSOE, NORMAN S ESQ
Address: 527 EAST UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32602 US

Title: VP
Name: BUCKLEY, DEANA
Address: 308 S ORLEANS AVE, UNIT #1
City-St-Zip: TAMPA, FL 33606 US

Title: S
Name: GILLIAM, MATTHEW
Address: 333 2ND ST. NE, APT 107
City-St-Zip: WASHINGTON, DC 20002 US

Title: T
Name: HATCHER, MICHAEL
Address: 10604 TAVISTOCK DRIVE
City-St-Zip: TAMPA, FL 33626 US

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: NORMAN S. BLEDSOE P 04/29/2010

Electronic Signature of Signing Officer or Director — Date