

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002333

FILED
Apr 25, 2010
Secretary of State

Entity Name: VILLAS OF CARILLON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9887 4TH STREET, NORTH
SUITE #301
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

2870 SCHERER DRIVE
STE. 100
SAINT PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 20-0842391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMPART PROPERTIES, INC.
9887 4TH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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: CHAVES, RAFAEL
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: VPD
Name: BURPEE, DAVID
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: SD
Name: GAN, KAREN
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: TD
Name: ROSENBERGER, GINA
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: KALAMAS, KELLY
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: ST. PETERSBURG, FL 33702

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: RAFAEL CHAVES

PD

04/25/2010

Electronic Signature of Signing Officer or Director

Date