

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005122

FILED
May 01, 2006
Secretary of State

Entity Name: VILLAS AT CORAL HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1177 KANE CONCOURSE, SUITE 102
BAY HARBOR ISLAND, FL 33154

New Principal Place of Business:

Current Mailing Address:

1177 KANE CONCOURSE, SUITE 102
BAY HARBOR ISLAND, FL 33154

New Mailing Address:

FEI Number: 20-3423614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MONTEMARANO, ANTHONY
1177 KANE CONCOURSE, SUITE 102
BAY HARBOR ISLAND, FL 33154 US

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 () Delete
Name: MONTEMARANTO, RINO
Address: 1177 KANE CONCOURSE, SUITE 102
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: DVP () Delete
Name: MONTEMARANO, ANTHONY
Address: 1177 KANE CONCOURSE, SUITE 102
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: DST () Delete
Name: MONTEMARANO, ROB
Address: 1177 KANE CONCOURSE, SUITE 102
City-St-Zip: BAY HARBOR ISLAND, FL 33154

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: RINO MONTEMARANO

DP

05/01/2006

Electronic Signature of Signing Officer or Director

Date