

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 02, 2009
Secretary of State

DOCUMENT# N04000008801

Entity Name: VILLAS AT CHARLESTON PARK ASSOCIATION, INC.**Current Principal Place of Business:**1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 380758
MURDOCK, FL 33938 US**New Mailing Address:****FEI Number:** 20-2499063**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GATEWAY MANAGEMENT
1532 RIO DE JANIERO BLVD
PUNTA GORDA, FL 33983 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: PVST () Delete
Name: SHIPPS, PETER E
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: D () Delete
Name: ROSS, LINDA J
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: D () Delete
Name: KOELLNER, EARL
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SINGER, MARTY
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: VPD (X) Change () Addition
Name: SESAK, MARYLOU
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: SD (X) Change () Addition
Name: GIBSON, WILLIAM
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: TD () Change (X) Addition
Name: CASE, ROBERT
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: D () Change (X) Addition
Name: HAAG, FREDERICK
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

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: MARTY SINGER

PD

06/02/2009

Electronic Signature of Signing Officer or Director

Date