2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008877

Entity Name: IL VILLAGIO COMMUNITY ASSOCIATION, INC.

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9745 TOUCHTON RD 8009 S ORANGE AVE JACKSONVILLE, FL 32246 ORLANDO, FL 32809 **Current Mailing Address: New Mailing Address:** 8009 S ORANGE AVE ORLANDO, FL 32809 FEI Number: 20-1806403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LELAND MANAGEMENT 8009 S ORANGE AVE ORLANDO, FL 32809 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ORTEGA, JORGE MULLEE, DANA SULLIVAN Name: Name: 9745 TOUCHTON RD Address: 9745 TOUCHTON RD #3228 Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246 Title: VD () Delete Title: (X) Change () Addition GINSBURG, LINDA AVILA, EDUARDO Name: Name: Address: 2601 S BAYSHORE DR STE 200 Address: 9116 SUPERLAND DRIVE City-St-Zip: MIAMI, FL 33133 City-St-Zip: JACKSONVILLE, FL 32256 Title: STD () Delete Title: (X) Change () Addition CISSEL, STEVE SCHUPP, ROBERT Name: Name: 9745 TOUCHTON RD 9745 TOUCHTON RD #2803 Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: D () Change (X) Addition Name: Name: MULLEE, KELLY 9745 TOUCHTON RD #421 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change (X) Addition LOFBERG, DEBORAH Name: Name: 9745 TOUCHTON RD #629 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change (X) Addition CORT. BRITTANY Name: Name: Address: Address: 9745 TOUCHTON RD #1830 JACKSONVILLE, FL 32246 City-St-Zip: 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: DANA SULLIVAN MULLEE PD 04/05/2007