2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008879

FILED Apr 30, 2008 Secretary of State

Entity Name: IL VILLAGIO NEIGHBORHOOD I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8009 S ORANGE AVE 5955 T.G. LEE BLVD. ORLANDO, FL 32809

SUITE 300

ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

5955 T.G. LEE BLVD. 5955 T.G. LEE BLVD, SUITE 300 SUITE 300 ORLANDO, FL 328224457

ORLANDO, FL 32822

FEI Number: 20-1862185 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 LELAND MANAGEMENT 8009 S. ORANGE AVE 5955 T.G. LEE BLVD.

ORLANDO, FL 32809 SUITE 300 US ORLANDO, FL 32822 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: 04/30/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MULLEE, DANA SULLIVAN GINSBURG, LINDA Name: Name: 9745 TOUCHTON RD #3228 Address: 9116 SUGERLAND DR Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32256

Title: VD () Delete Title: (X) Change () Addition

REASE, ADA Name: CORT, BRITTANY Name:

Address: 9745 TOUCHTON RD #2204 Address: 9745 TOUCHTON RD #1830 City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

Title: () Delete Title: (X) Change () Addition GREER, PATRICK LANE PASSKIEWICZ, NICOLE L Name: Name:

9745 TOUCHTON RD #2022 9745 TOUCHTON RD #323 Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

Title: TD (X) Delete Title: () Change () Addition

WILSON, PATRICIA Name: 9745 TOUCHTON RD #3103 Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip:

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: LINDA GINSBURG Ρ 04/30/2008