

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 16, 2007
Secretary of State**

DOCUMENT# N04000009102

Entity Name: VILLAS AMANTEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

592 3RD AVENUE SOUTH
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

592 3RD AVENUE SOUTH
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 20-1655472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER-BOSLEY, MARILYN
592 3RD AVENUE SOUTH
NAPLES, FL 34102 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: DPT () Delete
Name: MILLER-BOSLEY, MARILYN
Address: 592 3RD AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: MCCLUSKY, STEVE
Address: 592 3RD AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: DVS () Delete
Name: BOSLEY, PAUL R JR
Address: 592 3RD AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: DVS () Delete
Name: MCCLUSKY, KIM
Address: 592 3RD AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

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:

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: MARILYN MILLER BOSLEY

DPT

01/16/2007

Electronic Signature of Signing Officer or Director

Date