

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Sep 11, 2005
Secretary of State**

DOCUMENT# N04000009402

Entity Name: VILLA FRANCINE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

701 W CYPRESS CREEK RD STE 301
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

701 W CYPRESS CREEK RD STE 301
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

KODSI, ISAAC ESQ.
701 W CYPRESS CREEK RD STE 303
FT LAUDERDALE, FL 33309 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:

Title: DV () Delete
Name: KODSI, JOSEPH
Address: 1499 W PALMETTO PK RD STE 200
City-St-Zip: BACON RATON, FL 33486

Title: DP () Delete
Name: KODSI, ISSAC
Address: 701 W CYPRESS CREEK RD STE 301
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DST () Delete
Name: BRADY, PATRICIA
Address: 701 W CYPRESS CREEK RD STE 301
City-St-Zip: FT LAUDERDALE, FL 33309

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 Section 119.07(3)(i), 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: ISAAC KODSI

DP

09/11/2005

Electronic Signature of Signing Officer or Director

Date