

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

5 **FILED**
Jun 26, 2006 8:00 am
Secretary of State

05-04-2006 90252 035 ****61.25

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DOCUMENT # N04000010309			
1. Entity Name THE VILLAS AT CARROLLWOOD CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810		Mailing Address 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810	
2. Principal Place of Business 3939 Ehrlich Rd. Suite, Apt. #, etc.		3. Mailing Address 3939 Ehrlich Rd. Suite, Apt. #, etc.	
City & State Tampa, FL		City & State Tampa, FL	
Zip 33624		Country USA	
4. FEI Number 20-1834334		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZOM RESIDENTIAL SERVICES INC 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Kristen Pirett</u> <u>Kristen Pirett Property MGR</u> <u>6/21/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATTERSON, STEVEN W 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Monica Alberti 4008 Alexander Palm Dr. Tampa, FL 33624 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD BUCK, STEVEN K 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Mark Montano 1732 Tobacco Rd. Lutz, FL 33558 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP STEPHENS, SAMUEL C III 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Neri Heston 4005 Roslinata Dr. Tampa FL 33624 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD WEST, GREG T 1950 SUMMIT PARK DR SUITE 300 ORLANDO, FL 32810 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		6/20/06 516-353-2394 <small>Date Daytime Phone #</small>	