

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011006

Entity Name: VILLAS ESCALANTE, INC.

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

3435 10TH STREET N #201
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

3435 10TH STREET N #201
NAPLES, FL 34103

New Mailing Address:

FEI Number: 75-3194154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZORBALAS, SPIROS
3435 10TH STREET N #201
FORT MYERS, FL 33902 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: DP () Delete
Name: BOYLE, JAMES J
Address: 250 5TH AVE SOUTH #201
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: JACOBSON, SCOTT
Address: 270 5TH AVE SOUTH H-2
City-St-Zip: NAPLES, FL 34102

Title: OST () Delete
Name: WARD, WHITNEY
Address: 280 5TH AVE SOUTH H-1
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GARVIN, DAVID
Address: 270 5TH AVE SOUTH H-3
City-St-Zip: NAPLES, FL 34102

Title: DST (X) Change () Addition
Name: WARD, WHITNEY
Address: 280 5TH AVE SOUTH H-1
City-St-Zip: NAPLES, FL 34102

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: JAMES J BOYLE

DP

02/05/2009

Electronic Signature of Signing Officer or Director

Date