

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005057

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: VILLARIVA CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

2358 RIVERSIDE AVE  
PONTE VEDRA BEACH, FL 33602

## New Principal Place of Business:

2358 RIVERSIDE AVE  
JACKSONVILLE, FL 32204 US

## Current Mailing Address:

PO BOX 60816  
PONTE VEDRA BEACH, FL 33602

## New Mailing Address:

PO BOX 60816  
JACKSONVILLE, FL 32204 US

FEI Number: 20-2862948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALLIHAN, FRANCES T  
2358 RIVERSIDE AVE #505  
JACKSONVILLE, FL 32204 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: VD ( ) Delete  
Name: MCCAGUE, BETH  
Address: 2358 RIVERSIDE AVE. #506  
City-St-Zip: JACKSONVILLE, FL 32204

Title: PD ( ) Delete  
Name: NEWTON, RUSSELL JC  
Address: 2358 RIVERSIDE AVE. #1001  
City-St-Zip: JACKSONVILLE, FL 32204

Title: SD ( ) Delete  
Name: KAPLAN, PORTER  
Address: 2358 RIVERSIDE AVE. #404  
City-St-Zip: JACKSONVILLE, FL 32204

Title: TD ( ) Delete  
Name: HALLIHAN, FRANCES T  
Address: 2358 RIVERSIDE AVE #505  
City-St-Zip: JACKSONVILLE, FL 32204

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: BOWER, BRUCE  
Address: 2358 RIVERSIDE AVE. #101  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: PD (X) Change ( ) Addition  
Name: HALLIHAN, FRANCES T  
Address: 2358 RIVERSIDE AVE. #505  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: SD (X) Change ( ) Addition  
Name: VOLPE, TIMOTHY  
Address: 2358 RIVERSIDE AVE. #206  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: TD (X) Change ( ) Addition  
Name: GREENE, AUDREY  
Address: 2358 RIVERSIDE AVE #302  
City-St-Zip: JACKSONVILLE, FL 32204 US

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: FRANCES T. HALLIHAN

PD

03/02/2009

Electronic Signature of Signing Officer or Director

Date