

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005057

FILED  
Feb 03, 2012  
Secretary of State

**Entity Name:** VILLARIVA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2358 RIVERSIDE AVE  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

**Current Mailing Address:**

2358 RIVERSIDE AVE  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

**FEI Number:** 20-2862948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KAUFMAN, GREG  
2358 RIVERSIDE AVE  
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  
Name: BLACKSTONE, MIKE  
Address: 2358 RIVERSIDE AVE. #106  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: SD  
Name: MEILI, TRISHA  
Address: 2358 RIVERSIDE AVE. #1003  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: PD  
Name: VOLPE, TIMOTHY  
Address: 2358 RIVERSIDE AVE. #206  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: TD  
Name: PERKISON, GERALD  
Address: 2358 RIVERSIDE AVE #405  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D  
Name: EVERLY, LISE  
Address: 2358 RIVERSIDE AVE #805  
City-St-Zip: JACKSONVILLE, FL 32004 US

I hereby 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 all other like empowered.

**SIGNATURE:** G. D. KAUFMAN

RA

02/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date