2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNUAL REPORT											
DOCUMENT # N0500006094 1. Entity Name VILLA TREVI AT THE COLONY CONDOMINIUM							00				
ASSOCIA							PM 2:51				
	DRIVE SUITE 300	, STE 123			MLL	AHASSEI	OF STATE E. FLORIDA				
BONITA SPRINGS, FL 34134 C/O CHERRY, EDGAR & SMITH, PA PALM BEACH GARDENS, FL 33410 US											
2. Principal P	o Via 7		o Via Trevi Way								
Suite, Apt. #, etc. # 102			Suite, Apt. #, etc. # 102				07132008 Ch	ig-NP	CR2E037 (12/06)	Applied For	
Bonita Springs, FL			Bonita Springs, FL			-	20-307992		\$9.75 .	Not Applicable	
^{Zip} 34134		άŠΑ	34134	U	ISA		5. Certificate of Sta	itus Desired	Fee Requi		
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent				
HASTINGS, VIVIEN N							mes D. Ahling				
BONITA SPRINGS, FL 34134						Street Address (P.O. Box Number is Not Acceptable)					
						23750 Via Trevi Way # 102 City Bonita Springs FL Zip Code 34/34					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the the obligations of registered agent. • • • • • • • • • • • • • • • • • • •								the State of Flo	. ر	h, and accept	
SIGNATURE A COLOR											
Signature, typed outstined name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
Amended AR is \$61.25 9. Election Campaign Financing Trust Fund Contribution.							\$5.00 May Be Added to Fees		ake check payable ida Department of		
10.	OFFICERS AND DIRECTORS 11 PD 25-Delete 117							S TO OFFICER	RS AND DIRECTORS		
TITLE NAME	PD HJORTAA	TITLE			sident .niel J. Ha	irtuna	☐ Change	e 🔀 Addition			
STREET ADDRESS CITY-ST-ZIP	24301 WA BONITA S		T ADDRESS ST-ZIP	2.3	733 Trevi nita Spri	· Court	+ 34134				
TITLE	VSD		Delete TITLE			Vic	e President	. ' '	☐ Change	Addition	
NAME STREET ADDRESS		NAK, BRIAN ALDEN CENTER DR		NAME STREE	T ADORESS	Bruce Lamont 23717 Trevi Court					
CITY-ST-ZIP	L	SPRINGS, FL 34134		CITY-ST-ZIP Bo			nita Sprin	95, FL	34134		
TITLE	TD Delete TITLE					Sec	cretary IT	reasure	r ☐ Change	e 🔼 Addition	
NAME STREET ADDRESS						(e	orge Bea	ucham	p		
CITY-ST-ZIP		SPRINGS, FL 34134			ST-ZIP	T₃o	nita Spri	193 FL	34134		
TITLE			☐ Delete	TITLE				- J	☐ Change	e 🔲 Addition	
NAME STREET ADDRESS				NAME STREE	T ADDRESS		1 UU) 07/29/09	11336 301009	\$9003 1 004 **61.	20	
CITY-ST-ZIP				CITY-	ST-ZIP		017 237 00	, 01003	UUT **01.	.23	
title Name	1		☐ Delete	TITLE					☐ Change	e 🔲 Addition	
STREET ADDRESS					T ADDRESS						
CITY-ST-ZIP					ST-ZIP				<u></u>		
TITLE Name			☐ Delete	TITLE					☐ Change	e 🔲 Addition	
STREET ADDRESS					T ADDRESS						
CITY-ST-ZIP					ST-ZIP						
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: Dear GEORGE DEALCHAMP 7/17/08 231-487-1083											
SIGNATURE: Date Daysime Phone #											