2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N05000007996

Entity Name: THE VILLAS ON LAUREL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1685 LAUREL
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

9 FILLMORE DRIVE
SARASOTA, FL 34236

New Mailing Address:

540 JOHN RINGLING BOULEVARD
SARASOTA, FL 34236

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, ROBERT C
9 FILLMORE DRIVE
SARASOTA, FL 34236 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: ROOKS, W. HOWARD
Address: 9 FILLMORE DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: DV ( ) Delete
Name: MORRIS, ROBERT C JR
Address: 9 FILLMORE DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: DST ( ) Delete
Name: MORRIS, LISA R
Address: 9 FILLMORE DRIVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ROOKS, W. HOWARD
Address: 540 JOHN RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236

Title: DV (X) Change ( ) Addition
Name: MORRIS, ROBERT C JR
Address: 540 JOHN RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236

Title: DST (X) Change ( ) Addition
Name: MORRIS, LISA R
Address: 540 JOHN RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236

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: ROBERT C MORRIS DV 04/28/2008

Electronic Signature of Signing Officer or Director — Date