

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008298

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** VILANO COTTAGES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1012 OCEANVIEW COURT  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

1012 OCEANVIEW COURT  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

**FEI Number:** 20-4300775

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMON, BERT C  
1660 PRUDENTIAL DRIVE, SUITE 203  
JACKSONVILLE, FL 32207 US

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

ANDERSON, GEDDES D  
50 N. LAURA ST.  
SUITE 1675  
JACKSONVILLE, FL 32202 US

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: GEDDES ANDERSON

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SULLIVAN, BRIAN J  
Address: 1012 OCEANVIEW COURT  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: DV ( ) Delete  
Name: MCCARTHY, JOSEPH  
Address: 15 SCHOOL STREET  
City-St-Zip: BOSTON, MA 02108

Title: DST ( ) Delete  
Name: BEECHMAN, EDWARD J  
Address: 15 BOWDITCH ROAD  
City-St-Zip: JAMICA PLAIN, MA 02130

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: BRIAN SULLIVAN

MGR

04/15/2009

Electronic Signature of Signing Officer or Director

Date