## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000009474

FILED Apr 26, 2007 Secretary of State

Entity Name: MERCHANT VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

15429 BRUSHWOOD DRIVE 4125 CAUSEWAY VISTA DR

TAMPA, FL 33624 TAMPA, FL 33615

**Current Mailing Address: New Mailing Address:** 

15429 BRUSHWOOD DRIVE 4125 CAUSEWAY VISTA DR

TAMPA, FL 33624 TAMPA, FL 3615

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

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

MERCHANT, E L MERCHANT, E L 15429 BRUSHWOOD DRIVE 4125 CAUSEWAY VISTA DR TAMPA, FL 33624 TAMPA, FL 33615

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: 04/26/2007 Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

MERCHANT, E L MERCHANT, E L Name: Name:

Address: 15429 BRUSHWOOD DRIVE Address: 4125 CAUSEWAY VISTA DR TAMPA, FL 33624 TAMPA, FL 33615

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

ROBINSON, PAMELA A ROBINSON, PAMELA A Name: Name: Address: 15429 BRUSHWOOD DRIVE Address: 4125 CAUSEWAY VISTA DR

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33615

Title: () Delete Title: (X) Change ( ) Addition MERCHANT, JOSEPH M III MERCHANT, JOSEPH M III Name: Name: 15429 BRUSHWOOD DRIVE 4125 CAUSEWAY VISTA DR Address: Address:

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33615

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: JOSEPH M MERCHANT, III D 04/26/2007