

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009824

FILED
Apr 25, 2008
Secretary of State

Entity Name: VILLA DAVIDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27 DENNOCK LANE, SUITE 205
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

27 DENNOCK LANE, SUITE 205
JUPITER, FL 33458

New Mailing Address:

FEI Number: 11-3760187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOOGE, JR., HOWARD E
401 E. OSCEOLA STREET
STUART, FL 34994 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: FRANCAVILLA, EUGENE F
Address: 27 DENNOCK LANE, SUITE 205
City-St-Zip: JUPITER, FL 33458

Title: V () Delete
Name: DAVID, MARK
Address: 27 DENNOCK LANE, SUITE 205
City-St-Zip: JUPITER, FL 33458

Title: T () Delete
Name: WILLIAMS, GARNETT
Address: 27 DENNOCK LANE, SUITE 205
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: KELLAR, LUCY ANN
Address: 27 PENNOCK LN, STE 205
City-St-Zip: JUPITER, FL 33458

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:

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: EUGENE F FRANCAVILLA

DP

04/25/2008

Electronic Signature of Signing Officer or Director

Date