2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011628

FILED Feb 09, 2012 Secretary of State

Date

Entity Name: THE VILLAGE LOFTS CONDOMINIUM ASSOCIATION, INC.

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

5200 SW 91 TERRACE SUITE 101 GAINESVILLE, FL 32608

New Mailing Address: Current Mailing Address:

P.O. BOX 143086 C/O UNIVERSITY MANAGEMENT, INC. GAINESVILLE, FL 32614

FEI Number: 20-3805136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

UNIVERSITY MANAGEMENT, INC. 2811 SW ARCHER RD. ATTN: ROXANNE GORE GAINESVILLE, FL 32608 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:

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

SECHREST, MICHAEL D Name:

Address: 5200 SW 91 TERRACE, SUITE 101

City-St-Zip: GAINESVILLE, FL 32608

Title:

Name: BUTTS, ROBERT P

Address: 5200 SW 91 TERRACE, SUITE 101

City-St-Zip: GAINESVILLE, FL 32608

Title: SD

WARNER, D. MARC Name:

5200 SW 91 TERRACE, SUITE 101 Address:

City-St-Zip: GAINESVILLE, FL 32608

Title: TD

Name: FISHER, MARK S

Address: 5200 SW 91 TERRACE, SUITE 101

City-St-Zip: GAINESVILLE, FL 32608

Title: MGR

UNIVERSITY MANAGEMENT, INC. Name: 2811 S.W. ARCHER RD. Address: City-St-Zip: GAINESVILLE, FL 32608

I hereby 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 all other like empowered.

SIGNATURE: ROXANNE GORE **MGR** 02/09/2012