## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000835

FILED Apr 29, 2008 Secretary of State

Entity Name: VILLAS DU SOLEIL CONDOMINIUM ASSOCIATION, INC.

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

997 W KENNEDY BOULEVARD 90 HIDDEN LAKE DRIVE SUITE A-25 SUITE 131 SANFORD, FL 32773

Current Mailing Address: New Mailing Address:

997 W KENNEDY BOULEVARD
SUITE A-25
ORLANDO, FL 32810
90 HIDDEN LAKE DRIVE
SUITE 131
SANFORD, FL 32773

FEI Number: 02-0777495 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:

LAVELLE, PATRICIA

997 W. KENNEDY BLVD A25

ORLANDO, FL 32810 US

CANFLOR GENERAL INC.
90 HIDDEN LAKE DRIVE
131
SANFORD, FL 32773 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: MARK KOIVU 04/29/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: VD (X) Change ( ) Addition ame: BIEWEND, ANDRE' Name: KOIVU, WILLIAM

 Name:
 BIEWEND, ANDRE'
 Name:
 KOIVU, WILLIAM

 Address:
 997 W KENNEDY BLVD. #A-25
 Address:
 90 HIDDEN LAKE DRIVE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32773

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

Name: KOIVU, MARK Name: KOIVU, MARK

 Address:
 997 W KENNEDY BLVD. #A-25
 Address:
 90 HIDDEN LAKE DRIVE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32773

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

 Name:
 LAVELLE, PATRICIA
 Name:
 MILLER, STEVE

 Address:
 997 W KENNEDY BLVD. #A-25
 Address:
 90 HIDDEN LAKE DRIVE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32773

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: MARK KOIVU PD 04/29/2008