

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000835

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** VILLAS DU SOLEIL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

90 HIDDEN LAKE DRIVE  
SUITE 131  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**

90 HIDDEN LAKE DRIVE  
SUITE 131  
SANFORD, FL 32773

**New Mailing Address:**

**FEI Number:** 02-0777495

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANFLOR GENERAL INC.  
90 HIDDEN LAKE DRIVE  
131  
SANFORD, FL 32773 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: VD ( ) Delete  
Name: KOIVU, WILLIAM  
Address: 90 HIDDEN LAKE DRIVE  
City-St-Zip: SANFORD, FL 32773

Title: PD ( ) Delete  
Name: KOIVU, MARK  
Address: 90 HIDDEN LAKE DRIVE  
City-St-Zip: SANFORD, FL 32773

Title: STDV ( ) Delete  
Name: MILLER, STEVE  
Address: 90 HIDDEN LAKE DRIVE  
City-St-Zip: SANFORD, FL 32773

**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: MARK KOIVU

MM

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date