

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007051

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** PLEASANT VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1148 N RICE TERRACE  
CRYSTAL RIVER, FL 34429

**New Principal Place of Business:**

**Current Mailing Address:**

6222 35 AVENUE NORTH  
SAINT PETERSBURG, FL 33710

**New Mailing Address:**

**FEI Number:** 72-1618608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, BRET A  
1020 RICE TERRACE  
CRYSTAL RIVER, FL 34423 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:** P  
**Name:** PERRY, ROBERT O  
**Address:** 9133 EAST GOBBLER DRIVE  
**City-St-Zip:** FLORAL CITY, FL 34436

**Title:** ST  
**Name:** CALKINS, MAURITA  
**Address:** 6222 35 AVE N  
**City-St-Zip:** SAINT PETERSBURG, FL 33710

**Title:** VP  
**Name:** CARLTON, CLIFFORD S JR  
**Address:** 9204 SW 136 STREET CIRCLE  
**City-St-Zip:** MIAMI, FL 33176

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:** MAURITA CALKINS

ST

02/18/2010

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

\_\_\_\_\_  
Date