

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007575

FILED  
Feb 28, 2007  
Secretary of State

**Entity Name:** VILLAS OF HOLMES BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

701 BAYSHORE BLVD.  
SUITE 101  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

701 BAYSHORE BLVD.  
SUITE 101  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WARD, KEN  
701 BAYSHORE BLVD.  
SUITE 101  
TAMPA, FL 33606 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 ( ) Delete  
Name: RAIRIGH, RAYMOND L SR.  
Address: 13625 N. FLORIDA AVE.  
City-St-Zip: TAMPA, FL 33613 32

Title: VP ( ) Delete  
Name: WARD, KEN  
Address: 701 BAYSHORE BLVD., SUITE 101  
City-St-Zip: TAMPA, FL 33606

Title: SEC. ( ) Delete  
Name: WARD, KEN  
Address: 701 BAYSHORE BLVD., SUITE 101  
City-St-Zip: TAMPA, FL 33606

Title: TREA ( ) Delete  
Name: WARD, KEN  
Address: 701 BAYSHORE BLVD, SUITE 101  
City-St-Zip: TAMPA, FL 33606

**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 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: KEN WARD

VP

02/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date