2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000010558

FILED Sep 18, 2007 Secretary of State

Entity Name: VILLAS OF WEST MELBOURNE CONDOMINIUM ASSOCIATION, INC.

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

6905 N. WICKHAM ROAD SUITE 501 MELBOURNE, FL 32940

New Mailing Address: Current Mailing Address:

1978 ROCKLEDGE BLVD. SUITE 106 ROCKLEDGE, FL 32955

FEI Number: 20-0865301 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:

BURKE, BARABARA A BARIC, JOHN ESQ. 1200 SOUTH PINE ISLAND ROAD 6905 N. WICKHAM RD. PLANTATION, FL 33324 SUITE 501 MELBOURNE, FL 32940 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: JOHN BARIC 09/18/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BARIN, DAVID FOLEY, TODD Name: Name: 6905 N. WICKHAM ROAD, SUITE 201 Address: 6905 N. WICKHAM ROAD, SUITE 201 Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

Title: SD Title: VD (X) Change () Addition () Delete CURLES, THOMAS Name: DARVIN, HOWARD Name:

Address: 6905 N. WICKHAM ROAD, SUITE 401 Address: 6905 N. WICKHAM ROAD, SUITE 201

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

Title: () Delete Title: DST (X) Change () Addition O'TOOLE, HAZEL O'TOOLE, HAZEL Name: Name:

6905 N. WICKHAM ROAD, SUITE 401 6905 N. WICKHAM ROAD, SUITE 401 Address: Address:

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

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

Name: MITCHELL, KENNETH R Name: Address: 6905 N. WICKHAM ROAD, SUITE 401 Address: MELBOURNE, FL 32940 City-St-Zip: 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: TODD FOLEY Ρ 09/18/2007