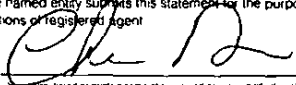


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90158 008 ****61.25

DOCUMENT # N06000012541			
1. Entity Name VILLA JARDINE HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business C/O PRESIDIO REALTY, INC. 2909 WEST BAY TO BAY BLVD, SUITE 202 TAMPA, FL 33629		Mailing Address C/O PRESIDIO REALTY, INC. 2909 WEST BAY TO BAY BLVD, SUITE 202 TAMPA, FL 33629	
2. Principal Place of Business - No P.O. Box # 239 OAK TREE CIRCLE		3. Mailing Address 239 OAK TREE CIRCLE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State DAYTONA BEACH FL		City & State DAYTONA BEACH FL	
Zip 32114	Country USA	Zip 32114	Country USA
4. FEI Number 90-0314982		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LUBRAT, LEONARD 100 WEST CYPRESS CREEK ROAD, SUITE 700 FORT LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name LINDAN CONDOMINIUM GROUP, SE LP Street Address (P.O. Box Number is Not Acceptable) 100 COLONIAL CENTER PARKWAY STE 170 City LAKE MARY FL Zip Code 32746	
8. 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. I am familiar with, and accept the obligations of registered agent.			
X SIGNATURE  (NOTE: Registered Agent signature required when terminating) DATE			
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DP KAHN, IRVING 2725 SOMERSET DRIVE LAUDERDALE LAKES, FL 33311 ☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	COURT APPOINTED RECEIVER DIANE MADDOX 100 COLONIAL CENTER PARKWAY STE 170 LAKE MARY FL 32746 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DCPT SLOMOVITS, ELI 2725 SOMERSET DRIVE LAUDERDALE LAKES, FL 33311 ☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	REGIONAL PROP. MGR. STEPHANIE LANSER 100 COLONIAL CENTER PARKWAY STE 170 LAKE MARY FL 32746 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DS NOWOSTARSKI, MIKE 950 MONTGOMERY RD ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	BUSINESS MANAGER LOEI MITCHELL 239 OAK TREE CIRCLE DAYTONA BEACH FL 32114 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
X SIGNATURE: 		4-28-08 678-335-0009	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	