

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N06166 1. Entity Name VILLAGES OF THOUSAND OAKS HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 5507 80TH AVE E PALMETTO, FL 34221	Mailing Address 501 BAYVIEW DRIVE HOLMES BEACH, FL 34217
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DO NOT WRITE IN THIS SPACE



07242008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2547784	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RESAM CORPORATION 501 BAYVIEW DR HOLMES BEACH, FL 34217
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing, Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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DATE
08/25/08-80004-023 61.25

10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	ARSENAULT, HENRY
STREET ADDRESS	5607 79TH AVE EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D
NAME	GOING, CHARLES
STREET ADDRESS	7809 54TH CT E
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	ST
NAME	ARLENYAH. JOYCE
STREET ADDRESS	5602 79TH AVE E
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D
NAME	BATES, DAVE
STREET ADDRESS	7809 80TH AVE EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D
NAME	ROYCE, STEVEN
STREET ADDRESS	5617 78TH AVE E
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: Henry Arsenault Henry ARSENAULT 8/21/08 944-722-9973