

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90132 039 ****61.25

DOCUMENT # N09934 1. Entity Name FLORIDA VILLAS HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 190 N. WESTMONTE DRIVE SUITE 100 ALTAMONTE SPRINGS, FL 32714			Mailing Address 190 N. WESTMONTE DRIVE SUITE 100 ALTAMONTE SPRINGS, FL 32714		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2888332	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CAMPBELL, MARILYN 190 N WEST MONTE DRIVE ALTAMONTE SPRINGS, FL 32714				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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-ST-ZIP	PD FIZER, GERMAINE 694 GOLDEN SUNSHINE CIR ORLANDO, FL 32807		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FIZER, GERMAINE 694 GOLDEN SUNSHINE CIR ORLANDO, FL 32807	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DOBBERT-HOLDERT, REBECCA 633 GOLDEN SUNSHINE CIR ORLANDO, FL 32807		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOBBERT-HOLDERT, REBECCA 633 GOLDEN SUNSHINE CIR ORLANDO, FL 32807	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, WANDA 3073 BAY LAUREL CIR N. KISSIMMEE, FL 347449477		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARRERA, ROSEMARY 670 GOLDEN SUNSHINE CIR. ORLANDO FL 32807	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MERCADO, MARYANN 638 GOLDEN SUNSHINE CIR ORLANDO, FL 32807		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MERCADO, MARYANN 638 GOLDEN SUNSHINE CIR ORLANDO, FL 32807	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILLA, EVELYN 700 GOLDEN SUNSHINE CIR ORLANDO, FL 32807		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Rebecca Dobbert-Holdert</i>			1-21-05 407-234-1252		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		
REBECCA DOBBERT-HOLDERT			P.P		