1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N17835

1. Corporation Name

VILLA SAN REMO HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 951 BROKEN SOUND PARKWAY STE. #250

**BOCA RATON FL 33487** 

Mailing Address

951 BROKEN SOUND PARKWAY STE. #250

BOCA RATON FL 33487

## FILED Mar 30, 1999 8:00 am § Secretary of State

03-30-1999 90027 017 \*\*\*\*61.25



City & State City & State 5. Certificate of Status Desired Fee Required  Zip Country 5. Country 6. Election Campaign Financing 5.00 May Be								·	
Sulfo, Apt. 8, etc.   Sulfo, Apt. 9, etc.	Principal Place of Business     2a. Mailing Address						•	1	
Sulfs, Apt. #, etc.    Sulfe, Apt. #, etc.   21	¬					11/19/1986	<u> </u>		
City & State —		#, etc.					App	lied For	
28   28   28   28   29   29   29   29	22		27			65-0023929	Not	Applicable	
Zp   Country   Zip   Country   Zip   Country   S.5.00 May Be   Added to Fees   S.5.00 May Be   S.5.00 May Be   Added to Fees				×		5 Contiferts of Status Desired			
Zip	23 28					5. Certificate of Status Desired	Fee Rec	quired	
9. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Name  14. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the pursuant of the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the pursuant of the provisions of Sections 617.0503 (Politic Statutes, the above-named corporations submits this statement for the pursuant are registered agent or both, in the State of Florida. Such change was sutherized by the corporations board of directors. I hereby accept the appointment are registered agent and the r		Country	Zip	Country		6. Election Campaign Financing	\$5.00	May Be	
COMMUNITY ASSOCIATION SERVICES 951 BROKEN SOUND PARKWAY STE, #250 BOCA RATON FL 33487  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutus, the above-harmed corporation submits this statement for the purpose of changing its registered againt. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, the above-harmed corporation submits this statement for the purpose of changing its registered againt. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered againt. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered againt. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered again. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered office or registrations board of directors. I hereby accept the appointment as registered again. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered again. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered office or registered differences. I hereby accept the appointment as registered dagent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered differences. I hereby accept the appointment as registered dagent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutus, statement for the purpose of changing its registered defices or registered defi	24	25	29 30	J .		Trust Fund Contribution	Added to	Fees	
COMMUNITY ASSOCIATION SERVICES  951 BROKEN SOUND PARKWAY  STE. #250  BOCA RATON FL 33487  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PD	<del></del>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regist	ered Agent		
SIE BROKEN SOUND PARKWAY SIE. #250 BOCA RATON FL 33487  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 817,0502, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agant. I am familiar with, and accept the obligations of, Section 817,0502, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 81,0502, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 81,0502.  SIGNATURE  Signifure, typed or private ration of registered agant and title 4 agolations. (PIOTE Registered Agart Signature registered agant.)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. STREET ADDRESS  3333 S. CONGRESS AVE, SUITE 403-B  12. STREET ADDRESS  3333 S. CONGRESS AVE, SUITE 403-B  22. NAME  23. STREET ADDRESS  24. D. T. T. T. D. D. DELETE  31. TILE  D. D. DELETE  32. STREET ADDRESS  33. STREET ADDRESS  34. GTY-ST-ZP  Change  Addition  ADDRESS AVE, SUITE 403-B  22. NAME  33. STREET ADDRESS  34. GTY-ST-ZP  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  A				81	Name				
SIE BROKEN SOUND PARKWAY SIE. #250 BOCA RATON FL 33487  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 817,0502, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agant. I am familiar with, and accept the obligations of, Section 817,0502, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 81,0502, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agant. I am familiar with, and accept the obligations of, Section 81,0502.  SIGNATURE  Signifure, typed or private ration of registered agant and title 4 agolations. (PIOTE Registered Agart Signature registered agant.)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. STREET ADDRESS  3333 S. CONGRESS AVE, SUITE 403-B  12. STREET ADDRESS  3333 S. CONGRESS AVE, SUITE 403-B  22. NAME  23. STREET ADDRESS  24. D. T. T. T. D. D. DELETE  31. TILE  D. D. DELETE  32. STREET ADDRESS  33. STREET ADDRESS  34. GTY-ST-ZP  Change  Addition  ADDRESS AVE, SUITE 403-B  22. NAME  33. STREET ADDRESS  34. GTY-ST-ZP  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  35. STREET ADDRESS  ADDRESS AVE, SUITE 403-B  A	COMMUNITY ASSOCIATION SEDVICES				R2 Street Address (P.O. Boy Number is Not Acceptable)				
STE. #250 BOCA RATON FL 33487  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  PD  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  TITLE  NAME  AKEL, RAMZI  AKEL, RAMZI  STREET ADDRESS  SCARDINA, CHARLES  STREET ADDRESS  STREET ADD					62 Street Address (F.O. Box Number is Not Acceptable)				
BOCA RATON FL 33487  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the Statement for the purpose of changing its registered agent, or both, in the Statement for the purpose of changing its registered agent, or both, in the Statement for the purpose of changing its registered agent, or both, in the Statement for the purpose of changing its registered agent, or both in the Statement for the purpose of changing its registered agent, or both accept the observation of the corporation submits this statement for the purpose of changing its registered agent, or both accept the observation of directors. I hereby accept the appointment agent and title agent and title appointment agent and titl									
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SIGNATURE    Signature, hybed or printed names of registered agent and title if application.   (NOTE: Rugistarior Agent algorative required when reinstative)   DATE	office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, I nereby accept the appointment as registered								
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

SIGNATURE DESCRIPTION OF SIGNING OFFICER OR DIRECTOR

3/25/99

Daytime Phone #

(2E03/ (11/98)