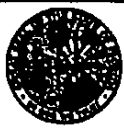


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2005 8:00 am
Secretary of State

03-21-2005 90089 030 ****61.25

DOCUMENT # N21147					
1. Entity Name ADIOS VILLAS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 970546 COCONUT CREEK, FL 33098 US			Mailing Address P.O. BOX 970546 COCONUT CREEK, FL 33098 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 65-0037417	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TADDOUIA, PAUL 3430 NW 71ST STREET COCONUT CREEK, FL 33073			Name <u>Suzan Dionne</u> Street Address (P.O. Box Number is Not Acceptable) <u>3821 NW 71 ST</u> City <u>Coconut Creek FL</u> Zip Code <u>33073</u>		
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 <u>Suzan L. Dionne</u> SUZAN L. DIONNE 3.4.05					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fee	
		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	SD DIONNE, SUZAN PO BOX 970546 COCONUT BEACH, FL 33097	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TADDONIO, PAUL PO BOX 970546 COCONUT BEACH, FL 33097	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director PAUL TADDONIO P.O. BOX 970546 Coconut Creek, FL 33097 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERGAMO, TAMMY PO BOX 970546 COCONUT BEACH, FL 33097	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Bryce Russell P.O. Box 970546 Coconut Creek, FL 33097 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAULLET, DIANE PO BOX 970546 COCONUT BEACH, FL 33097	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President DIANE PAULLET Same ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUNTHER, DAVID PO BOX 970546 COCONUT CREEK, FL 33097	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President DAVID GUNTHER Same ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROLFF, AREND PO BOX 970546 COCONUT BEACH, FL 33097	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Suzan L. Dionne, Secy</u>			3.4.05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

SUZAN L. DIONNE