2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# N21799

Entity Name: SAN MARCO VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-2501472 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	VPSD	( ) Delete
Name:	WEISS, JOANNE	
Address:	179 W SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	D	(X) Delete
Name:	CLAMP, STEVEN	
Address:	228 W SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	TD	( ) Delete
Name:	MCCARRICK, DON	
Address:	181 W. SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	PD	( ) Delete
Name:	ROBERTSON, PHYLLIS	
Address:	240 W SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	D	( ) Delete
Name:	LANE, TERRY	
Address:	274 W SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	ASD	( ) Delete
Name:	TUCKER, JENNIFER	
Address:	260 W SABAL PALM PL	
City-St-Zip:	LONGWOOD, FL 32779	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS ROBERTSON PD 04/16/2008
Electronic Signature of Signing Officer or Director — Date