

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 28, 2012**  
**Secretary of State**

DOCUMENT# N27361

**Entity Name:** VILLAS DEL CASTILLO PROPERTY OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**2725 ANDES WAY  
ST CLOUD, FL 34769 US**New Principal Place of Business:**2021 13TH STREET  
ST CLOUD, FL 34769 US**Current Mailing Address:**PO BOX 700250  
ST CLOUD, FL 34770**New Mailing Address:**2021 13TH STREET  
ST CLOUD, FL 34769 US**FEI Number:** 59-2830290**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RODRIGUEZ, NORENE  
2725 ANDES WAY  
ST CLOUD, FL 34769 US**Name and Address of New Registered Agent:**MARTINEZ, DONNIE  
2021 13TH STREET  
ST CLOUD, FL 34769 US

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: DONNIE MARTINEZ

06/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GOINS, KEVIN  
Address: 2021 13TH STREET  
City-St-Zip: ST. CLOUD, FL 34769

Title: VP  
Name: SOLIS, ABIGAIL  
Address: 2021 13TH STREET  
City-St-Zip: ST. CLOUD, FL 34769

Title: ST  
Name: GOINS, TAMMY  
Address: 2021 13TH STREET  
City-St-Zip: ST. CLOUD, FL 34769

I hereby 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 all other like empowered.

SIGNATURE: DONNIE MARTINEZ

LCAM

06/28/2012

Electronic Signature of Signing Officer or Director

Date