

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34330

FILED  
Apr 28, 2010  
Secretary of State

Entity Name: VILLA MARE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

VILLA MARE CONDO ASSOC  
3211 S OCEAN BLVD  
HIGHLAND BCH, FL 33487 US

## New Principal Place of Business:

VILLA MARE CONDO ASSOC  
3211 S OCEAN BLVD  
HIGHLAND BCH, FL 334872525 US

## Current Mailing Address:

VILLA MARE CONDO ASSOC  
3211 S OCEAN BLVD  
HIGHLAND BEACH, FL 33487 US

## New Mailing Address:

VILLA MARE CONDO ASSOC  
3211 S OCEAN BLVD  
HIGHLAND BEACH, FL 334872525 US

FEI Number: 65-0246076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRUMMER, KATHLENE K LCAM  
3211 S. OCEAN BLVD.  
MANAGEMENT OFFICE  
HIGHLAND BEACH, FL 33487 US

## Name and Address of New Registered Agent:

GRUMMER, KATHLENE K LCAM  
3211 S. OCEAN BLVD.  
MANAGEMENT OFFICE  
HIGHLAND BEACH, FL 334872525 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: KATHLENE K GRUMMER

04/28/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: VIAU, KAREN  
Address: 3211 S. OCEAN BLVD.  
City-St-Zip: HIGHLAND BEACH, FL 33487 US

Title: T  
Name: ROSEN, HARRIS  
Address: 3211 S OCEAN BLVD  
City-St-Zip: HIGHLAND BEACH, FL 33487 US

Title: VP  
Name: SUFRIN, JUDY  
Address: 3211 S OCEAN BLVD  
City-St-Zip: HIGHLAND BEACH, FL 33487 US

Title: S  
Name: FIORILLA, MARY  
Address: 3211 S. OCEAN BLVD.  
City-St-Zip: HIGHLAND BEACH, FL 33487 US

Title: D  
Name: AIN, HELEN  
Address: 3211 S. OCEAN BLVD.  
City-St-Zip: HIGHLAND BEACH, FL 33487 US

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: KAREN VIAU

P

04/28/2010

Electronic Signature of Signing Officer or Director

Date