

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43573

FILED
Feb 21, 2011
Secretary of State

Entity Name: VILLA FIORE HOME OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5310 CLARK RD
SUITE 207
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

3412 CLARK RD
PMB #236
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 65-0275104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE BARLOW GROUP
5310 CLARK RD
SUITE 207
SARASOTA, FL 34233 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: STD
Name: DONNELLAN, ROBERT
Address: 3412 CLARK ROAD, # 236
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: AUGUST, BARRY
Address: 3412 CLARK ROAD, #236
City-St-Zip: SARASOTA, FL 34231

Title: PD
Name: EISNER, BRUNO
Address: 3412 CLARK RD, PMB #236
City-St-Zip: SARASOTA, FL 34231

Title: VD
Name: WOOD, IRV
Address: 3412 CLARK RD, PMB, #236
City-St-Zip: SARASOTA, FL 34231

Title: VD
Name: WALTERS, HELENE
Address: 3412 CLARK ROAD, #236
City-St-Zip: SARASOTA, FL 34231

Title: AS
Name: BURNETT, CLIVE
Address: 3412 CLARK RD. #236
City-St-Zip: SARASOTA, FL 34231

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: CLIVE BURNETT

AS

02/21/2011

Electronic Signature of Signing Officer or Director

_____ Date