

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46502

FILED
Mar 18, 2008
Secretary of State

Entity Name: VICTORIA LAKES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5400 SOUTH UNIVERSITY DRIVE
SUITE 101
DAVIE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

C/O PROGRESSIVE MANAGEMENT ASSOCIATES, INC
5400 S UNIVERSITY DRIVE, SUITE 101
DAVIE, FL 33328 US

New Mailing Address:

FEI Number: 65-0464038 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EISENGER, BROWN, LOUIS & FRANKEL, PA
4000 HOLLYWOOD BOULEVARD
SUITE 265 - SOUTH
HOLLYWOOD, FL 33021 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: P () Delete
Name: WESTERDAHL, HOWARD
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: VP () Delete
Name: KARAKUNNEL, SIMON
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: S () Delete
Name: LAWRENCE, LESLIE
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: T () Delete
Name: MCCONNELL, ROBIN
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: SCHEINHAUS, ALAN
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: D (X) Delete
Name: GETEJANC, TODOR
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: BUGG, SCOTT
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: PD (X) Change () Addition
Name: KARAKUNNEL, SIMON
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: SD (X) Change () Addition
Name: LAWRENCE, LESLIE
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: TD (X) Change () Addition
Name: MCCONNELL, ROBIN
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: D (X) Change () Addition
Name: GETEJANC, TODOR
Address: 5400 SOUTH UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

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: SIMON KARAKUNNEL

PD

03/18/2008

Electronic Signature of Signing Officer or Director

Date