

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
Tallahassee, FL 32399-0001

FILED
SECRETARY OF STATE
CORPORATIONS

95 MAY -1 AM 8:28

DOCUMENT # **N47145** (0)

VILLA SAN REMO, NEIGHBORHOOD A HOMEOWNERS ASSOCIATION INC.

Principal Place of Business: 9774 ERICA CT BOCA RATON FL 33496
Mailing Address: 9774 ERICA CT BOCA RATON FL 33496

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/03/1992	3a. Date of Last Report 06/22/1994
4. FEI Number 65-0324762	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. 9070 KIMBERLY BLVD Suite, Apt. #, etc. NO 27, SUITE 114	26. BOCA RATON FL 33496 Suite, Apt. #, etc. 9774 ERICA CT
22. BOCA RATON FL City & State	27. BOCA RATON FL City & State
23. 33434 Zip	28. BOCA RATON FL Zip
24. PAUM BEACH Country	29. BOCA RATON FL Country

9. Name and Address of Current Registered Agent

VIGODA, STEPHEN
9774 ERICA CT
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81. Name **JOHN SPINAZZE**
82. Street Address (P.O. Box Number is Not Acceptable)
9765 ERICA CT
83.
84. City **BOCA RATON** FL 85. Zip Code **33496**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John Spinazze Date: 5/15/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	NAME HAIG, LARRY	11. TITLE Pres	JACK MYDLARE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9724 ERICA CT	CITY, ST, ZIP BOCA RATON FL	12. NAME D	9858 ERICA CT.
		13. STREET ADDRESS BOCA RATON FL 33496	
		14. CITY, ST, ZIP BOCA RATON FL 33496	
TITLE ST	NAME MIA, JOHN	21. TITLE VEEP	BERNARD KINNEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9751 ERICA CT	CITY, ST, ZIP BOCA RATON FL	22. NAME D	9767 ERICA CT
		23. STREET ADDRESS BOCA RATON 33496	
		24. CITY, ST, ZIP BOCA RATON FL 33496	
TITLE VO	NAME VIGODA, STEPHEN	31. TITLE S/T	JOHN SPINAZZE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9774 ERICA CT	CITY, ST, ZIP BOCA RATON FL	32. NAME D	9765 ERICA CT.
		33. STREET ADDRESS BOCA RATON FL 33496	
		34. CITY, ST, ZIP BOCA RATON FL 33496	
TITLE	NAME	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	42. NAME	
		43. STREET ADDRESS	
		44. CITY, ST, ZIP	
TITLE	NAME	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	52. NAME	
		53. STREET ADDRESS	
		54. CITY, ST, ZIP	
TITLE	NAME	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	62. NAME	
		63. STREET ADDRESS	
		64. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and flows not equidly for the exemption stated in Section 119.03(2)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Stephen Vigoda **STEPHAN VIGODA** Date: 4/28/95 338-3173