

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000529

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** PARK VILLAS STORMWATER RETENTION AREA MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

118 WASHINGTON AVE  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

118 WASHINGTON AVE  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

**FEI Number:** 59-3169154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROSE, RUSSELL  
118 WASHINGTON AVE  
CAPE CANAVERAL, FL 32920 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:** DP  
**Name:** ROSE, RUSSELL  
**Address:** 118 WASHINGTON AVE  
**City-St-Zip:** CAPE CANAVERAL, FL 32920

**Title:** DT  
**Name:** FRYE, STACIE  
**Address:** 134 WASHINGTON AVE  
**City-St-Zip:** CAPE CANAVERAL, FL 32920

**Title:** DSV  
**Name:** ELLET, MERLE  
**Address:** 126 WASHINGTON AVE  
**City-St-Zip:** CAPE CANAVERAL, FL 32920

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:** RUSSELL T ROSE

DP

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date