


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # N94000001941	
1. Entity Name VILLAMAR CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 835 18TH ST APT 403 VERO BEACH, FL 32960	Mailing Address 835 18TH ST APT 403 VERO BEACH, FL 32960
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01062007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1602712	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SCHWENK, HAROLD 835 18TH ST APT 403 VERO BEACH, FL 32960
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Harold Schwenk 1/21/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

000000617167
02/07/07-80064-013 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOW, AL 835 18TH STREET #604 VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHWENK, HAROLD 825 18TH STREET - #403 VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SEVERINO, RUTH 835 18TH ST #508 VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNELLY, DAVID 835 18TH ST. APT. #207 VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LANDRY, IRENE 835 18TH ST APT 110 VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harold Schwenk Harold Schwenk 1/21/07 772-569-8995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #