

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001941

FILED  
Mar 24, 2011  
Secretary of State

**Entity Name:** VILLAMAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

835 18TH ST  
APT 403  
VERO BEACH, FL 32960

**New Principal Place of Business:**

835 18TH ST  
BUILDING 100  
VERO BEACH, FL 32960

**Current Mailing Address:**

835 18TH ST  
APT 403  
VERO BEACH, FL 32960

**New Mailing Address:**

835 18TH ST  
BUILDING 100  
VERO BEACH, FL 32960

**FEI Number:** 59-1602712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHWENK, HAROLD A DT  
835 18TH ST  
APT 403  
VERO BEACH, FL 32960 US

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

CONNOLLY, DAVID P DP  
835 18TH ST  
APT 207  
VERO BEACH, FL 32960 US

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: DAVID P. CONNOLLY

03/24/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FISHER, HAROLD D  
Address: 835 18TH STREET #208  
City-St-Zip: VERO BEACH, FL 32960

Title: VPD  
Name: BROOK, PAMELA  
Address: 825 18TH STREET - #308  
City-St-Zip: VERO BEACH, FL 32960 IR

Title: SD  
Name: SEVERINO, RUTH  
Address: 835 18TH ST #508  
City-St-Zip: VERO BEACH, FL 32960

Title: PD  
Name: CONNOLLY, DAVID P  
Address: 835 18TH ST. APT. #207  
City-St-Zip: VERO BEACH, FL 32960 IR

Title: TD  
Name: HUBERT, LAURA  
Address: 835 18TH ST APT 205  
City-St-Zip: VERO BEACH, FL 32960

Title: D  
Name: FISHER, HAROLD D  
Address: 835 18TH ST. APT.208  
City-St-Zip: VERO BEACH,, FL

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: DAVID P. CONNOLLY

PRES

03/24/2011

Electronic Signature of Signing Officer or Director

Date