

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002129

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: VENTANA OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

4000 VENTANA BLVD  
ROCKLEDGE, FL 32955 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 560328  
ROCKLEDGE, FL 329560328 US

## New Mailing Address:

FEI Number: 59-3241128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAZIO, DALE  
4101 LAS CRUCES WAY  
ROCKLEDGE, FL 32955 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: T ( ) Delete  
Name: FAZIO, DALE  
Address: 4101 LAS CRUCES WAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: SPIRIDIGLLOZZI, JOE  
Address: 4175 VENTANA BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: P ( ) Delete  
Name: RITTER, WILLIAM  
Address: 4119 ORION WAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: S ( ) Delete  
Name: MINOT, THOMAS  
Address: 4174 VENTANA BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: YONKER, ROBERT C  
Address: 4153 SAN YSIDRO WAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Change ( ) Addition  
Name: HATFIELD, KURT  
Address: 4090 ORION WAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: P (X) Change ( ) Addition  
Name: MINOT, THOMAS  
Address: 4174 VENTANA BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: S (X) Change ( ) Addition  
Name: O'KELLY, GARY  
Address: 4176 VENTANA BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: V ( ) Change (X) Addition  
Name: KUTA, KARA  
Address: 4154 SAN YSIDRO WAY  
City-St-Zip: ROCKLEDGE, FL 32955

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: ROBERT C. YONKER

T

03/22/2009

Electronic Signature of Signing Officer or Director

Date