


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90059 014 ****61.25

| | |
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| DOCUMENT # N95000003798 |  |
| 1. Entity Name VILLAS AT SPRING CREEK HOMEOWNERS ASSOCIATION, INC. | |

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|---|---|
| Principal Place of Business 1596 DERBY LANE MELBOURNE FL 32935 US | Mailing Address 1596 DERBY LANE MELBOURNE FL 32935 US |
|---|---|

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|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

| | | | |
|--------------|--------------|------------------------------------|--|
| City & State | City & State | 4. FEI Number 59-3326273 | Applied For <input type="checkbox"/> Not Applicable |
| Zip | Country | Zip | Country |



1st MOORE CR2E037 (10/04)

| | |
|--|--|
| 6. Name and Address of Current Registered Agent CARROLL, EDWARD T 3447 HORSE CREEK CIRCLE MELBOURNE FL 32935 | |
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|--|-------------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | FL Zip Code |

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 *Edward T. Carroll* (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD GENDRON, JAMES 1591 DERBY LANE MELBOURNE FL 32935 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP KLAPROTH, ROBERT 1620 DERBY LANE MELBOURNE FL 32935 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S DOMBROWSKI, DOROTHY A 1641 DERBY LANE MELBOURNE FL 32935 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D JONES, FRED 1630 DERBY LANE MELBOURNE FL 32935 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D GOODWIN, JACK 3456 HORSECREEK CIRCLE MELBOURNE FL 32935 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D DOMBROWSKI, THOMAS 1641 DERBY LN. MELBOURNE FL 32935 <input checked="" type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition FEENEY-MARINO, PATRICIA 1660 DERBY LANE MELBOURNE, FL 32935 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition KAUFMAN, SHERYL 3462 HORSE CREEK CIRCLE MELBOURNE, FL 32935 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition FONGEALLAZ, WILLIAM 3455 HORSE CREEK CIRCLE MELBOURNE, FL 32935 |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *William Fongallaz* (William Fongallaz) 3/19/05 (321) 752-6091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #