



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90302 006 ****61.25

DOCUMENT # N96000001461					
1. Entity Name VILLAGES ON LAKE AUGUSTA I AT BRECKENRIDGE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business PEGASUS PROPERTY MGMT 17595 S TAMIAMI TRAIL #100 FORT MYERS, FL 33908 US			Mailing Address PEGASUS PROPERTY MGMT 17595 S TAMIAMI TRAIL #100 FORT MYERS, FL 33908 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-0786518				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
EATON, BARBARA A 17595 S TAMIAMI TRAIL #100 C/O PEGASUS FORT MYERS, FL 33908			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	NATALIA, KITT	NAME			
STREET ADDRESS	20121-304	STREET ADDRESS			
CITY-ST-ZIP	ESTERO, FL 32928	CITY-ST-ZIP			
TITLE	DVP <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BRENTON, JOHN	NAME	DVP HEATER, BARBARA 20121 IAN COURT #208 ESTERO, FL 33928		
STREET ADDRESS	20111-304 IAN CT	STREET ADDRESS			
CITY-ST-ZIP	ESTERO, FL 33928	CITY-ST-ZIP			
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MIRSBERGER, RALPH	NAME	PD		
STREET ADDRESS	20111 IAN CT 105	STREET ADDRESS			
CITY-ST-ZIP	ESTERO, FL 33908	CITY-ST-ZIP			
TITLE	PD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	LAVERTU, DONALD	NAME	DT MARVIN HUBAN 20121 IAN COURT #210 ESTERO, FL 33928		
STREET ADDRESS	20121 IAN CT #110	STREET ADDRESS			
CITY-ST-ZIP	ESTERO, FL 33928	CITY-ST-ZIP			
TITLE	VPD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	SKILES, FRANCES	NAME	TD JARVIS, DALE 20111 IAN COURT #310 ESTERO, FL 33928		
STREET ADDRESS	20111 IAN COURT #301	STREET ADDRESS			
CITY-ST-ZIP	ESTERO, FL 33928	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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: <i>Marvin Huban</i> 4/25/05					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					