2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002595

FILED Jan 28, 2009 Secretary of State

Entity Name: VILLA DI LANCIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2171 GULF OF MEXICO DR LONGBOAT KEY, FL 34228 US **Current Mailing Address: New Mailing Address:** 5500 MARINA DR SUITE 1 HOLMES BEACH, FL 34217 US FEI Number: 65-0747232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HEROLD, WILLIAM M JR. HEROLD, WILLIAM M JR. 5500 MARINA DR 5500 MARINA DR HOLMES BEACH, FL 34217 US HOLMES BEACH, FL 34217 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: 01/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition MAGUIRE, THOMAS Name: Name: 2165 GULF OF MEXICO DR, STE 125 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: SD Title: SD () Delete (X) Change () Addition LANGE, CHAD Name: LANGE, CHAD Name: Address: 636 12TH STREET SE Address: 636 12TH STREET SE City-St-Zip: OWATONNA, MN 55060 City-St-Zip: OWATONNA, MN 55060 US Title: () Delete Title: () Change () Addition MARRIMAN, BOB Name: Name: Address: PO BOX 190 Address: City-St-Zip: WALLAND, TN 37886 City-St-Zip: (X) Change () Addition Title: VPD () Delete Title: VPD Name: SOLTIS, JESSE E Name: SOLTIS, JESSE E 1800 GENEVA CLUB DR Address: 1800 GENEVA CLUB DR Address: City-St-Zip: LAKE GENEVA, WI 53147 City-St-Zip: LAKE GENEVA, WI 53147 US Title: () Delete Title: (X) Change () Addition CARR, ARTHUR CARR, ARTHUR Name: Name: 44 DONNELLY DR 44 DONNELLY DR Address: Address: DOVER, MA 02030 DOVER, MA 02030 US City-St-Zip: City-St-Zip:

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: ARTHUR CARR D 01/28/2009