

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004369

FILED
Jan 11, 2008
Secretary of State

Entity Name: VILLA VICTORIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

706 NE 2ND ST
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

706 NE 2ND ST
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-0697923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEAVER, CAROLYN
706 NE 2ND ST
SUITE 10
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

POLK, JIM
706 NE 2ND ST
SUITE 1
FT LAUDERDALE, FL 33301 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: JIM POLK

01/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEAVER, CAROLYN
Address: 706 NE 2ND ST SUITE 10
City-St-Zip: FT LAUDERDALE, FL 33301

Title: VPSD () Delete
Name: MOON, JASON
Address: 706 NE 2ND ST SUITE 5
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD () Delete
Name: PLATT, ANNE
Address: 706 NE 2ND ST SUITE 9
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: POLK, JIM
Address: 706 NE 2ND ST SUITE 1
City-St-Zip: FT LAUDERDALE, FL 33301

Title: VPSD (X) Change () Addition
Name: DEPALMA, DEVIDA
Address: 706 NE 2ND ST SUITE 6
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: () Change () Addition
Name:
Address:
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: ANNE F. PLATT

TD

01/11/2008

Electronic Signature of Signing Officer or Director

Date