2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# N97000001234

Entity Name: THE VILLAGES AT BUCKINGHAM, INC.

Current Principal Place of Business:

C/O TROPICAL ISLES MANAGEMENT
12734 KENWOOD LANE SUITE 49
FT. MYERS, FL 33907 US

New Principal Place of Business:

C/O SPIRES & ASSOCIATES
12734 KENWOOD LANE SUITE 49
FT. MYERS, FL 33907 US

Current Mailing Address:

C/O TROPICAL ISLES MANAGEMENT
12734 KENWOOD LANE SUITE 49
FT. MYERS, FL 33907 US

New Mailing Address:

% SPIRES & ASSOCIATES
12734 KENWOOD LANE SUITE 49
FT. MYERS, FL 33907 US

FEI Number: 65-0741123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROEDDING, DOUGLAS
12734 KENWOOD LANE
SUITE 49
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

SPIRES, JAMES W JR.
12734 KENWOOD LANE
SUITE 49
FT. MYERS, FL 33907 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: JAMES W. SPIRES, JR. 07/14/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WALTERS, KIM
Address: 15540 HORSESHOE LANE
City-St-Zip: FORT MYERS, FL 33908

Title: VP ( ) Delete
Name: LAWSON, JERRY
Address: 15527 SPRINGLINE LN
City-St-Zip: FORT MYERS, FL 33905

Title: STD ( ) Delete
Name: CORTES, ROSALINA
Address: 15628 SUNNY CREST LANE
City-St-Zip: FORT MYERS, FL 33908

Title: ASM ( ) Delete
Name: ROEDDING, DOUGLAS
Address: 12734 KENWOOD LANE SUITE 49
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ASM (X) Change ( ) Addition
Name: SPIRES, JAN
Address: 12734 KENWOOD LANE SUITE 49
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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: JAN SPIRES ASM 07/14/2006
Electronic Signature of Signing Officer or Director Date