

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007063

FILED
Apr 17, 2006
Secretary of State

Entity Name: VILLAS DEL MAR HOMEOWNER ASSOCIATION, INC.

Current Principal Place of Business:

265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3507013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BRAD, JAMES
Address: 24 EAST SCOTT STREET
City-St-Zip: CHICAGO, IL 60610

Title: PD () Delete
Name: BEHLING, BRUCE W
Address: N 57 W 30816 LAKEWOOD DR
City-St-Zip: HARTLAND, WI 53029

Title: VPD () Delete
Name: D'AMICO, RICHARD
Address: 2035 KENWOOD PARKWAY
City-St-Zip: MINNEAPOLIS, MN 55405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: JAMES, BRAD
Address: 24 EAST SCOTT STREET
City-St-Zip: CHICAGO, IL 60610

Title: VPD (X) Change () Addition
Name: D'AMICO, RICHARD
Address: 2035 KENWOOD PARKWAY
City-St-Zip: MINNEAPOLIS, MN 55405

Title: SD (X) Change () Addition
Name: GAGNON, CAROL
Address: 69 TOURAINE RD
City-St-Zip: CHICAGO, IL 60610

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: GLENN CARROLL

PRES

04/17/2006

Electronic Signature of Signing Officer or Director

Date