


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2006 8:00 am
Secretary of State

08-11-2006 90002 043 ****61.25

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| DOCUMENT # N98000004563 | |  |
| 1. Entity Name VILLAS II OF ST. ANDREWS ASSOCIATION, INC. | | |

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| Principal Place of Business C/O CAPRI PROPERTY MGMT., INC. 810B PINEBROOK RD. VENICE, FL 34292 | Mailing Address C/O CAPRI PROPERTY MGMT. INC. 810 B PINEBROOK ROAD VENICE, FL 34292 |
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50025008



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| 2. Principal Place of Business C/O ARGUS MGMT OF VENICE Suite, Apt. #, etc. 181 CENTER ROAD City & State VENICE FL Zip 34285 Country US | | 3. Mailing Address C/O ARGUS MGMT OF VENICE Suite, Apt. #, etc. 181 CENTER ROAD City & State VENICE FL Zip 34285 Country US | |
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07112006 Chg-NP CR2E037 (4/06)

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| 4. FEI Number 65-0856465 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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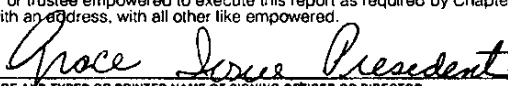
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| 6. Name and Address of Current Registered Agent IOSUE, GRACE LIGHTHOUSE MGMT 16 CHURCH ST OSPREY, FL 34229 | |
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| 7. Name and Address of New Registered Agent Name ARGUS MGMT OF VENICE, INC. Street Address (P.O. Box Number is Not Acceptable) 181 CENTER ROAD City VENICE FL Zip Code 34285 | |
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| 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  C.A.M. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE | |
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| Filing Fee is \$61.25 Due by September 6, 2006 | 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 |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD IOSUE, F 875 CHALMERS DR VENICE, FL 34293 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD IOSUE, G. 875 CHALMERS DR VENICE, FL 34293 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD FREEL, SUSAN 898 TARTAN DR. VENICE, FL 34293 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD RUSKEN, ESTER 892 TARTAN DR VENICE, FL 34293 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD TOURVILLE, CECIL 894 TARTAN DR. VENICE FL, 34293 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD FREEL, SUSAN 898 TARTAN DR. VENICE, FL 34293 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PISCOPO, KEN 906 TARTAN DR. VENICE, FL 34293 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date Aug 4, 2006 Daytime Phone # |