## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006583

Apr 29, 2005 Secretary of State

Entity Name: THE VILLAGES REGIONAL MEDICAL CENTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1100 MAIN ST
THE VILLAGES, FL 32159

1020 LAKE SUMTER LANDING
THE VILLAGES, FL 32162

Current Mailing Address: New Mailing Address:

1100 MAIN ST THE VILLAGES, FL 32159 1020 LAKE SUMTER LANDING THE VILLAGES, FL 32162

FEI Number: 59-3550841 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:

WISE, JOHN
1100 MAIN ST
THE VILLAGES, FL 32159 US
SKATES, JEFFREY P
1028 LAKE SUMTER LANDING
THE VILLAGES, FL 32162 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: JEFFREY P. SKATES 04/29/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: TD ()Delete Title: ()Change ()Addition

 Name:
 UPTON, TERRY
 Name:

 Address:
 1451 EL CAMINO REAL
 Address:

 City-St-Zip:
 THE VILLAGES, FL 32159
 City-St-Zip:

Title: VD ( ) Delete Title: V (X) Change ( ) Addition

Name: WISE, JOHN Name: DZURO, MARTIN L

 Address:
 1100 MAIN ST
 Address:
 1020 LAKE SUMTER LANDING

 City-St-Zip:
 THE VILLAGES, FL 32159
 City-St-Zip:
 THE VILLAGES, FL 32162

Title: VD ( ) Delete Title: S (X) Change ( ) Addition

Name:NICHOLAS, PAUL JName:MYERS, ROBERTAddress:1451 EL CAMINO REALAddress:1451 EL CAMINO REALCity-St-Zip:THE VILLAGES, FL 32159City-St-Zip:THE VILLAGES, FL 32159

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERRY R. UPTON P 04/29/2005