

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006803

FILED
Apr 02, 2009
Secretary of State

Entity Name: ASSOCIATION OF VERSAILLES HOME OWNERS, INC.

Current Principal Place of Business:

1608 ATARES DRIVE
112
PUNTA GORDA, FL 33950

New Principal Place of Business:

C/O 1551 ATARES DRIVE
112
PUNTA GORDA, FL 33950

Current Mailing Address:

P.O. BOX 511234
PUNTA GORDA, FL 33951 US

New Mailing Address:

FEI Number: 65-0971474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPICCOLO, RICHARD
1608 ATARES DRIVE
112
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

MIZE, DENNIS
1560 ATARES DRIVE
112
PUNTA GORDA, FL 33950 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: DENNIS MIZ

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: LAPICCOLO, RICHARD
Address: 1608 ATARES DR., #112
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP () Delete
Name: GUGLIOTTA, ANTHONY
Address: 1608 ATARO DR., 111
City-St-Zip: PUNTA GORDA, FL 33950

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MIZE, DENNIS
Address: 1560 ATARES DR., #112
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP (X) Change () Addition
Name: GUGLIOTTA, ANTHONY
Address: 1608 ATARES DR., 111
City-St-Zip: PUNTA GORDA, FL 33950

Title: TRS () Change (X) Addition
Name: BROWN, GILLIAN A
Address: 1551 ATARES DR. #112
City-St-Zip: PUNTS GORDA, FL 33950 CH

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: GILLIAN A. BROWN

TRES

04/02/2009

Electronic Signature of Signing Officer or Director

Date