

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000024978

1. Entity Name
VILLA BALLERO, INC.



Principal Place of Business
**34990 EMERALD COAST PKWY
SUITE 401
DESTIN, FL 32541**

Mailing Address
**34990 EMERALD COAST PKWY
SUITE 401
DESTIN, FL 32541**



01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3565267

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KRUSE, CRAIG J
34990 EMERALD COAST PKWY
SUITE 401
DESTIN, FL 32541**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **KRUSE, CRAIG J**
STREET ADDRESS **34990 EMERALD COAST PKWY., STE 401**
CITY-ST-ZIP **DESTIN, FL 32541**

TITLE **S**
NAME **SENNER, GERALD E**
STREET ADDRESS **131 LAKEWOOD ESTATE DR**
CITY-ST-ZIP **NEW ORLEANS, LA 70131**

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03/15/06-80062-024 150.00

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IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all of the like empowered.

SIGNATURE: CRAIG J. KRUSE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 Feb 2006 856 2691212
Date Daytime Phone #